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Vol. 55, No. 4 Whole Number 448

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THE CRISIS *was founded in 1910 and is the official organ of the National Association for the Advancement of Colored People. It is published monthly at 20 West 40th Street, New York 18, N. Y., by the Crisis Publishing Co., Inc., Dr. Louis T. Wright, president; Walter White, secretary; and Mrs. Lillian A. Alexander, treasurer. The subscription price is $1.50 a year or 15 cents a copy. Foreign subscriptions $1.75. The date of expiration of each subscription is printed on the wrapper. When the subscription is due a blue renewal blank is enclosed. The address of a subscription may be changed as often as desired, but both the old and new address must be given and three weeks' notice is necessary. Manuscripts and drawings relating to colored people are desired. They must be accompanied by return postage, and while* THE CRISIS *uses every care, it assumes no responsibility for their safety in transit. Entered as second class matter November 2, 1910, at the post office at New York, N. Y. under the act of March 3, 1879.*

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EDITORIAL ROUNDUP

COVER — Ann Keller and Roland Mitchell, who model the new sport sweaters of the NAACP, are both workers in the national office: Miss Keller, in the office of the executive secretary; Mr. Mitchell, in the circulation department of *The Crisis*.

These sweaters are priced at $1.25 each and may be ordered from the youth division of the NAACP. Be sure to specify size in ordering. The NAACP banner in the background is priced at $20.00 and may be ordered from the branch department.

•

AFTER READING the letters for and against Henry Wallace, our readers might want to examine the recently published *Henry Wallace: the Man and the Myth*, by Dwight Macdonald. It contains meat for thought.

•

W. MONTAGUE COBB is professor of anatomy at Howard university, Washington, D. C., and a member of the national medical committee of the NAACP. Dr. Cobb is a prolific writer and the author of many scientific articles and monographs.

"Progress and Portents for the Negro in Medicine," a continuation of the study begun in the author's "Medical Care and the Plight of the Negro," *The Crisis*, July, 1947, will subsequently be published as an NAACP pamphlet.

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College and School News

ALABAMA STATE COLLEGE observed the forty-eighth anniversary of its opening February 9, with the Rev. W. F. Madison, presiding elder of the Tuskegee district of the AMEZ church, as featured speaker.

Merle Eppes, professor of history at the Tennessee A & I college, spoke at the opening of the annual observance of Negro history week February 8. Divisional assemblies featured various aspects of the history of the Negro in Alabama.

Ninety students were featured on the honor roll of the college for work done during the fall quarter. Highest honors went to Rose Helen Merrell, a senior and native of Montgomery, Alabama, who made "A" in all her subjects.

Dr. William S. Nelson, dean of the school of religion at HOWARD UNIVERSITY, has published a symposium, *The Christian Way in Race Relations.* The book, published by Harpers, presents thirteen views of how to apply Christianity to a solution of "America's number one problem"—race relations. Among the contributors are George D. Kelsey, professor of philosophy and religion, Morehouse; J. Neal Hughley, professor of social science, North Carolina College for Negroes; and Harry V. Richard, chaplain, Tuskegee Institute.

MOREHOUSE COLLEGE celebrated its eighty-first anniversary February 18. At the anniversary banquet Dr. Harold D. Trost, minister of the First Methodist church, Rochester, Minnesota, addressed the large dinner audience on the subject of "Prelude for Tomorrow."

President Mays announced at the banquet that the college, since the beginning of his administration in 1940, has added $800,000 to its endowment, and that an additional $140,000 has been raised toward the current expense budget. Special tributes were paid to Charles H. Wardlaw, for forty years a member of the faculty and staff; Mrs. Ludie Eichelberge, who served on the dormitory staff for almost forty years; and Mrs. Ludie Andrews, superintendent of MacVicar hospital at Spelman. Hazel Harrison, distinguished concert pianist, gave a concert during the six-day celebration.

Annual memorial exercises in tribute to two former Morehouse presidents, Dr. John Hope and Dr. Samuel Howard Archer, were conducted by the col-

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lege students, February 20. Dr. Hope was president of Morehouse from 1906 to 1931. He died February 20, 1936. Macmillan announces publication in May of a biography of Dr. Hope by Ridgely Torrence. Dr. Archer was at the helm of Morehouse for seven years, 1931-1938. He died January 15, 1941.

Among recent speakers at ATLANTA UNIVERSITY have been Rev. Harrison McMains, pastor of the First Christian church, Atlanta; Hon. Rhys J. Davies, M. P. and member of the British labor party; and Dr. John Hope Franklin, professor of history at Howard.

Atlanta again invites Negro artists and sculptors to participate in the seventh annual exhibition of paintings, sculpture, and prints by Negro artists, to open at the university in April. For the best eleven art works submitted, the university will give $1,400 in cash-purchase awards ranging from $300 to $10. Only original paintings, sculptures, and prints will be eligible for the exhibition.

The nineteenth annual festival of music and art will be held at FISK UNIVERSITY April 29-May 1. Among those to be featured on the program will be Pearl Primus, dancer; Edward Matthews, baritone and former Fisk Jubilee Singer; and Marjorie Kinnan Rawlings, author of *The Yearlings.* Daily seminars will be a feature of the three-day festival.

Dr. L. Semington Curtis is new visiting professor of economics, on leave of absence from Stowe. Dr. Madeleine Georges-Sylvain Bouchereau, assistant professor of romance languages, recently appeared with a six-man forum on a discussion of "Europe after Hitler" in Dallas, Texas. Dr. George N. Redd, head of the department of education, reported on the status of research on the education of the Negro during the annual meeting of the American Educational Research Association, Atlantic City, N. J., February 21-24.

The university announces acceptance of the preliminary report of the Fisk and Meharry Preparatory Commission for the first International Congress on Mental Health, which meets in London, England, in August.

VIRGINIA STATE COLLEGE was host in February to the Jeanes supervisors of Virginia schools. General theme of the conference was "Planning and Carrying out Cooperatively the Program of Education in a Local School Division." General consultant for the group was Dr. Thomas Hopkins, professor of edu-

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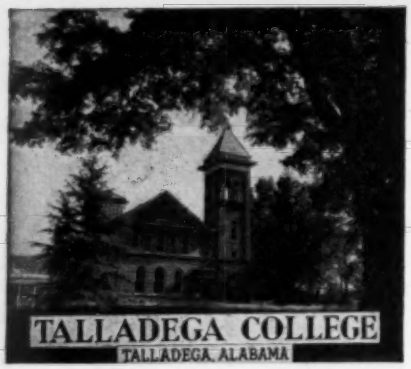

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cation at Teachers College, Columbia university.

Selma Burke, well-known sculptress, was a recent visitor at ST. AUGUSTINE'S COLLEGE, where she gave a lecture-demonstration of her art before an appreciative audience.

National brotherhood week was observed at the college with talks from three speakers: Cyrus Johnson, secretary of the North Carolina Interracial Commission; Mrs. A. F. Klein, president of the North Carolina Association of Jewish Women, and Rev. Frederick B. Eutsler, pastor of the United Church, Rochester, N. Y.

SHAW UNIVERSITY has added a film library for use in the biological sciences. The collection, which amounts to more than 4,500 feet of film, cost over $500 and is largely in the area of physiology.

Dr. John Hope Franklin, professor of history at Howard, was featured speaker in the observance of Negro history week.

Shaw has become recipient of a mural from the Union Carbide and Carbon Corporation made available through the instrumentality of William E. Cotter. The theme of the graphic canvas is the progress of science from earliest days to the present. The gift will be hung in the university library.

AGRICULTURAL AND TECHNICAL COLLEGE (Greensboro, N. C.) celebrated Negro history week in February with a program commemorating the contribution of Negroes to world history. The speakers for the celebration were Waters E. Turpin, novelist and professor of English at Lincoln (Pa.); Selma Burke, sculptress; and Theodore C. Murray, historical researcher. Other distinguished visitors on the campus during February were Congresswoman Helen Gahagen Douglas, Marzieh Gail, Bahaist; and Erno Balogh, distinguished Hungarian-American pianist.

Armistead S. Pride, dean of the LINCOLN UNIVERSITY (Mo.) school of journalism, has been given a leave of absence by the university board of curators to accept a fellowship granted him recently by the American Council of Learned Societies. Mr. Pride will begin his study and research at Northwestern university, April 1.

The university celebrated Negro history week February 4-15, with Dr. Herbert Aptheker, professor of history at Brooklyn college; Dr. Lorenzo J. Greene, and Dr. W. Sherman Savage among the speakers.

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been officially accepted by President Sherman D. Scruggs in behalf of the board of curators. One of the buildings will be used immediately as the university infirmary; the other will house a library, two study halls, kitchen, and small storage rooms.

Seventeen volumes have recently been added to the Marcha Bingham Clyce Memorial collection of the school of journalism library as gifts of the founder of the collection, Chester A. Smith, Boston, Massachusetts.

West Virginia State College was host February 16 to the West Virginia College Music Educators Association, an organization consisting of all music instructors in state and private schools in West Virginia.

Dr. Richard I. McKinney, president of Storer College, spent four days at Berea college (Kentucky) lecturing under the sponsorship of the American Friends Service. Dr. McKinney is one of three lecturers sponsored this school term by the Service Comittee. The others are Allen Freelon, special assistant to the director of fine arts, School District of Philadelphia; and Dr. John Lovell, Jr., associate professor of English at Howard university.

Mrs. Dorothy Zeiger has joined the social science staff of the College of Education and Industrial Arts, Wilberforce, for the spring quarter as professor of intercultural education. Mrs. Zeiger is a graduate of Iowa State College and Columbia university, with additional study at Wisconsin and Harvard universities.

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NO JIM CROW, SAY CAFETERIA CASHIERS

If 325 cafeteria cashiers of the United Office and Professional Workers of America (CIO) have their way—and they intend to—the counters where you pay your money and take your change will soon be manned by both Negro and white workers.

The cashiers, members of UOPWA, Local 16, have signed a new contract which for the first time provides that "there shall be no discrimination against any applicant for employment or any employee on account of race, color, creed, political or union affiliation." Approval of this clause was unanimous among the cashiers. No white-collar worker, they said, has real job security until the jim-crow bar is abolished.

THE CRISIS—$1.50 a Year

THE SEQUEL

The ten Negroes and whites arrested last summer for attempting to use the swimming pool of the Palisades Amusement Park, N. J. (See "Bilboism in New Jersey, *The Crisis* January, 1948.) were told in February by U. S. Judge William F. Smith that the antidiscrimination provisions of the federal civil rights law do not apply to a private amusement park. Judge Smith, therefore, dismissed the twenty counts of a twenty-six-count damage suit charging the owners of Palisades Amusement Park and the police chief of Fort Lee with conspiracy to violate the civil rights of the ten Negroes and whites from New York.

"The full and equal enjoyment of the accommodations and facilities of a private amusement park is not a right or privilege secured by the Constitution." Judge Smith ruled. Plans are under way for an appeal.

BUNCHE GUEST SPEAKER

Dr. Ralph J. Bunche, director, Trusteeship Division, United Nations, and chief of United Nations Secretariat to Palestine, was guest speaker, at the 28th anniversary dinner of the League for Mutual Aid on February 14 at the King Arthur restaurant, New York City.

The League was organized 28 years ago to give service to men and women in the liberal, labor, and progressive movements in times of personal emergency. No charge is made for any service.

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Letters to the Editor

These two letters from the president of Tuskegee Institute and our reply speak for themselves.

To the Editor of The Crisis:

I have just had brought to my attention the editorial appearing in the February issue on Candidate Wallace. In the third paragraph of the editorial it states as follows: "Mr. Wallace found time to speak several times at Tuskegee, an institution where white and colored guest speakers are sent to separate guest houses." I thought perhaps you would like to know that this statement is not correct. We have but one guest house on our campus in which all speakers, regardless of race, are housed and guests on our campus are served in the teacher's cafeteria without any form of segregation whatever. I am sorry whoever wrote this editorial was thoughtless enough to make this damaging statement against Tuskegee Institute.

F. D. PATTERSON
President

Tuskegee Institute
February 23, 1948

OUR REPLY

I have your letter of February 23 and I regret more than I can say the erroneous statement contained in the editorial on Mr. Wallace in the February issue of The Crisis. I wrote the editorial myself and I was honestly under the impression that the system of separate guest houses which had been in vogue in Tuskegee for so many years was in effect at the time to which I refer in the Wallace editorial.

It is true, is it not, that separate guest houses were maintained for white and colored guests? When did this policy change and the present arrangement take effect? My reference to Mr. Wallace had to do with invitations extended to him at various times in 1941, 1942, 1943 and 1944. Had the separate guest houses been abolished at that time?

I will be glad to have an answer from you on or before March 15, if that is possible, so that a statement from your letter may be carried in the correction we will run.

ROY WILKINS
Assistant Secretary

New York, New York
March 4, 1948

A REJOINDER

When Dorothy Hall, our present guest house, was used as a part of the teaching program in home economics, a special space on the top floor was reserved for the white members of the Board of Trustees. There was never any time when we had a guest house exclusively used by Negro guests.

For the last eight or ten years now, Dorothy Hall has been developed entirely for guest activities and as such for all guests regardless of race or color.

F. D. PATTERSON
President

Tuskegee Institute
March 11, 1948

Editorials

KEEP AN EYE ON THE COMMUNNISTS

THE way the Communists took over Czechoslovakia is a good illustration of their method of operating in a democratic country. For many years American Communists have been trying to "sweet talk" American Negroes. There was little reason to trust them before Czechoslovakia. There is certainly no reason today. They seek to worm their way into Negro organizations to learn the inside workings, to control policy, to make these organizations follow the Communist line. Many Negro organizations have been signing petitions, introducing resolutions, sending protests, and joining delegations on matters that have been put up to them by the Communists in their midst.

The way for Negroes to keep control of their organizations is not to bar Communists from membership, *but to out-work them and out-vote them in meetings.* They never have many in any one organization, but those few Communists attend meetings regularly. They get themselves on committees, and then they attend committee meetings. Suppose a group has an executive committee of fifteen persons, with only two Commies or close fellow travelers among them. That would seem to be a safe margin, a good democratic representation. But only about seven members attend committee meetings. The two Commies are always present. Nearly always they have at least one friend each on the committee whom they can influence. Thus they control the little executive committee of seven or eight.

This means that a Negro organization of perhaps 500 members is being made to say things and do things that two Commies and their two friends want said and done. Many of our organizations in smaller communities are flattered at the attention they are suddenly getting from some whites. They are very glad to welcome whites who say they are against segregation, that they want to help the "Negro people" fight for their rights against the Mayor, the chief of police, the school board, etc. Before these organizations know it, they have passed resolutions backing up the Communist party's current line of action.

If our organizations want to keep control of their own affairs, the members must attend meetings, serve on committees, draft their own resolutions, send their own statements to the press, elect men and women of their own choice to office—and they must do these things faithfully, week after week and month after month. If they do not, they will be taken over as Czechoslovakia was captured.

BLOODSHED OVER CIVIL RIGHTS?

IT remained for Senator Harry F. Byrd of Virginia to threaten bloodshed over the civil rights program. Other profesional office-holders from the South have shouted and blustered, but not one except the Senator from Virginia went so far as to say publicly that any effort to put the civil rights program into practice would be likely to provoke bloodshed. The Senator thus climbed down from the place where statesmen are suposed to be, and took his place along with the Klan and other mobs.

Speaking over a radio station in Arlington, Va., March 7, Senator Byrd drew a parellel between this spring and that period right after the Civil War which had "such disastrous results in racial hatred and bloodshed."

Byrd, like many another politician in the South, is not speaking for the South; he is speaking for the Byrd system of government which he does not want to see destroyed. This system keeps the Byrds, Maybanks, Rankins, Russells, McClellans, and the rest in power.

There is more than a little indication that the South of the Byrds is in reality a minority. Negroes form one-third of the South's population. Certainly they do not subscribe to the Byrd rantings. Six million whites in southern states are disfranchised by the poll tax. They have never had a chance to say at the polls whether they want Byrd and his crowd in office or not. Organized labor in Dixie is not a unit behind the Byrd system. And then there is the growing number of liberal whites who do not want Byrd, Rankin and Company. By themselves they are helpless, but with Negroes, labor and a section of the disfranchised whites they would very likely form a majority.

Thus the southern "revolt" is exposed for what it is, a revolt of office-holders and 19th century professional southerners. These latter are using their old stage prop of the Klan, trying their best to whoop it up in the best 1876 tradition. But the southern people are not in revolt. Governor Tuck of Virginia has been rebuked by his people. Governor Jester of Texas made it clear that he was speaking for himself and not for his party. Governor Thompson of Georgia did likewise. The governors of Florida and Maryland did not join in the statement of the others.

Meanwhile President Truman is standing pat on his February 2 message to the Congress on civil rights. Mr. Truman says his message was based squarely on the Democratic party platform of 1944 and on the Constitution. He might have added that it is based also upon the inexorable march of events. Governor Fielding H. Wright and his fellow white Mississippians may not realize it as yet, but those with a better vantage point than the mud bayous of the Delta region see the handwriting on the wall: civil rights for Negroes must become a fact. It is one of the necessities to the survival of the democratic system in this hemisphere, and no threat of bloodshed—or even bloodshed itself—is going to prevent its becoming a reality.

RED FACE

JUST when Governor M. E. Thompson of Georgia was attending a meeting of southern governors for the purpose of denouncing the Federal civil rights program, and bragging that the states had mob violence firmly under control, the Ku Klux Klan attacked two reporters (white) for the Columbus, Ga., *Enquirer.* Prior to that time the Klan had paraded and burned a cross at Wrightsville, Ga., the night before a primary election and the following day not a Negro voted, although several hundred were qualified. Negroes today, whites to morrow . . . civil rights for everybody, or soon civil rights for none.

NO JIM CROW ARMY

THE President's message to the joint session of the Congress March 17 demanded a peacetime draft as well as universal military training. There is now a very real possibility that either or both of these will be enacted into law before the end of this session. *But segregation in the armed services must be abolished.* We must not again have the indefensible spectacle of a jim-crow army, navy and air force "fighting for freedom." Write to President Truman and to the senators from your state.

For or Against Wallace?

THE Crisis editorial on Henry Wallace in the February issue ("Candidate Wallace," p. 41) must be the correct estimate of the man because every mail since its appearance has brought us letters about equally divided between those hailing (or damning) us for endorsing Wallace, and those damning us for opposing him.

Before we consider several of the letters, it should be explained that in the January issue The Crisis reviewed the candidates for president of both parties ("A Look at the Candidates," p. 9), setting forth their records on the so-called Negro problem. This editorial was written about December 15 and at that time Mr. Wallace had not declared his candidacy, so that he was not included in the January estimate.

The January issue had been out hardly 48 hours when we received a note from a Bronx subscriber complaining that his favorite, Wallace, had been omitted, and that he did not want the magazine any more. (So far only the "liberal" Wallace suporters, the disciples of tolerance, freedom of speech, freedom of the press, the *real* democrats, the progressives, etc., etc., have said they are canceling their subscriptions; apparently the "reactionary" citizens in the Democratic and Republican parties are not afraid of an evaluation of their candidates. Does that mean, we wonder, that if the Wallace followers ever got in power, those publications that did not bow to Henry and praise him would be put out of business?)

We wrote the Bronx, pointing out that many magazines go to press two months ahead of the date of issue, and that even our little publication had to close its pages two or three weeks in advance.

So, after Henry made his announcement in late December, we wrote our piece, "Candidate Wallace," for the February issue. We stand by that estimate of the man and his record on the Negro. We did not endorse Henry, as evidenced by the anguished howls of some of his sensitive followers, the gleeful quotation of a few selected paragraphs by a Wallace campaign newspaper notwithstanding.

Those people familiar with the ups and downs of the Negro's struggle during the past sixteen years and of Wallace's place in it have said the editorial was fair to him. He certainly has not been the perfect and consistent defender of Negro rights that his followers would have Negroes believe. Since about 1943 he has been outspoken, and since 1946 he has been even daring in his pronouncements. Being out of office and in no position to carry out his declarations, his words have to be judged as one judges the utterances of any "out" seeking to become an "in."

But 1943 is only five years ago and those recent recruits who prattle today so glibly about the "Negro people's cause" need to understand that the problem and the record of its friends and foes are much older than that. We might well ask where was the voice of Henry Wallace during the critical and bitter struggle of the Negro during 1940 and 1941 to make a dent in the Army-Navy policy? The one great voice crying out against discrimination in the armed services then was that of the late Wendell L. Willkie. Indeed, Willkie's trumpeting during August and September of 1940 forced the desperate action of the Roosevelt administration in late October of that year altering in some degree the iron-clad policy.

But to the letters. Robert and Selma Singer of Chicago write:

Your editorial "Candidate Wallace" (February *Crisis)* prompts this letter. The writer of that masterpiece must be aiming for a job with Hearst or the Scripps-Howard newspapers. To read such petty, malicious sniping at Wallace, a recognized friend of the Negro and all minorities, in your magazine is disinheartening . . . I challenge you to name another American of equal stature, who has mass support, who has given such impetus toward solving the "Negro Problem."

Attacking Wallace for "Jim Crow" in the Commerce dept. is sniping. He held that office for a very short time during a critical period of world problems. He was removed by Truman, a Democrat, who replaced him with a notorious reactionary Republican—Harriman.

P. S. We do not intend to renew.

Nevertheless, the fact remains that when Mr. Wallace was Secretary of Commerce he did not even begin to break up the notorious segregation of colored and white workers in his department, nor did he lift a finger to do anything about the humiliating refusal to feed Negroes at the National Airport. His successor, the "reactionary Republican" W. Averell Harriman, asked for a bill in Congress to correct the situation as soon as it was brought to his attention.

From Mr. Wallace's home state of Iowa, Max Womack of Iowa City writes:

It pains me no end to read in this month's "Crisis" your out and out support of H. A. Wallace as candidate for president. It seems to me you are taking a very shortsighted view of the whole situation.

First of all, what are Wallace's chance of succeeeding with a 3rd party? Very minute, unless he is going to upset some basic political science laws. He'll only succeed in splitting the Democratic party and shove Taft into the presidency. I can't see that Taft will improve the segregation problem any at all.

Secondly, don't you give President Truman any credit at all? I challenge the second paragraph of your editorial because Truman *did* make several radio appearances and *demanded* civil rights for Negroes. Too, Mr. Truman is a southerner. To break away from his ideology is truly for him a great thing. I speak here from experience. He demanded civil rights fearlessly with the knowledge that he'd turn his whole area against him. What then did he stand to gain from this stand? Only a clear conscience as I can see because it means almost virtual political destruction.

Please don't be guilty of the thing for which we so soundly condemn our white antagonist—shortsightedness and narowness of viewpoint. You should at least give President Truman credit for what he has done.

Mr. Womack evidently did not read our estimate of President Truman in the January issue. That piece is called an endorsement of Truman by George McDonald of San Francisco, who writes:

I would like to call your attention to the January issue of the "Crisis" in which I take issue with two articles. One regarding the line up of Presidential candidates and the other, is, the comment on the report of President Truman's committee for civil rights. As to the

(*Continued on page* 126)

Progress and Portents for the Negro in Medicine

By W. Montague Cobb

IN the near twelvemonth since the publication of "Medical Care and the Plight of the Negro" by the NAACP[1] much of significance has happened and an unprecedented public interest in health matters as they affect the Negro has been aroused. The Federal Security Agency has become seriously concerned with corrective measures. Independent progressive groups like the Physicians Forum and the Association of Internes and Medical Students have been vigorously active for improvements. The Association of American Medical Colleges has been made formally aware of the problem.[2] The National Medical and National Dental Associations have begun to address programs to it. The reports of the President's Committee on Civil Rights and Commission on Higher Education and of the Commission on Hospital Care, appointed through the American Hospital Association, all recommending abolition of segregated practices in their spheres, have appeared. The United States Supreme Court has handed down the Sipuel decision and President Truman has charged Congress with his civil rights program.

On the other hand, an idea for perpetuating segregation through the "regional school" proposal has come out of the Southern Governors' Conference. New separate veterans hospitals for Negroes have also been proposed and opposed.[3] Indications have appeared that in the South and, indirectly, in parts of the North, various subterfuges will be used to avoid compliance with the non-discrimination clause of the Hill Burton Hospital Survey and Construction Act. There are plans afoot for new hospitals in which altruistic purpose, white resistance to integration, and Negro exploitation of segregation are curiously interwoven.

A breach in the walls of discrimination has actually been made in respect to the Gallinger Municipal Hospital in Washington through the signal efforts of Federal Security Administrator Oscar R. Ewing. Howard University is making plans for enlarging its plant to increase production of physicians and dentists. The faculty of one medical school which has never had Negro students, that of Washington University in St. Louis, has voted to accept them. Other medical schools, all in the North, have indicated a willingness to accept more Negro students if they can get better qualified applicants than those who have hitherto applied. Many dental schools exhibit a similar attitude.

This article continues the author's study of the medical and health problems begun in "Medical Care and the Plight of the Negro," The Crisis, July, 1947. Whereas the author was concerned in his earlier study mainly with the professional plight of the Negro physician, he here studies the same problem both historically and in its broader social aspects

It is an exciting period fraught with challenge and controversy and marked by a speedy sequence of events, yet it is a vital and critical period in which what is done and planned will affect the future for a long time to come.

Critical Times

Our previous summary[1] cited the unsatisfactory health status of the Negro and his lag behind the general population in receipt of the benefits of medical and health advances. It described the medical "ghetto" arrangements into which most attempts to meet Negro health needs have had to be fitted. And it showed how inadequate this approach has been and how unjustifiable have been the attempts at continuance of the segregative system by expedient expansions wherever pressure demanded.

Today there seems to be universal acknowledgment of the needs to be met, but a divergence only on how they should be met. On the one hand there is the position that the thing to do is to meet the need, even if one must accept the segregation, on the other there is the position of those who have had experience with segregated methods and who believe that principles are as important as goals.

The battle is joined on the issue that forthright dealing with segregation as a feature of our national life must be faced. There is no corner of the nation which has not felt the impact of the president's civil rights' message. We are beginning to realize that the time is at hand when every American will have to stand up and be counted on the question of those fundamental rights which we have always avoided facing until today. Neither the rationalizations of the individual conscience nor the deft phrasing of a public commitment can any longer be used as a "hidin' place." Humanity is in Mr. Truman's debt for his having brought a great world power to a critical examination of itself as no leader has done before. In order to expand the basis for an understanding of Negro health problems by both the public and the professions we present here additional facts, many totally new, which bring into sharper focus the major needs as well as the indicated remedies. Having previously furnished[1] a broad survey of current conditions, we now feel that the historical approach will add perspective.

This article will be published later as an NAACP pamphlet. Because of fluctuating production costs, the price will be announced at that time.

Beginnings in Medicine

The beginnings of the Negro in medicine are to be found in *ante bellum* days, and the first identifiable personality was a man named Simon, who was described in a notice of escape in the Pennsylvania Gazette of September 11, 1740, as able to "bleed and draw teeth," and one who "pretended to be a great doctor among his people."[4]

Other Negroes began practice among their own people and later attracted the attention of whites. An early outstanding example was that of a man called Caesar. In 1792 he had made such a favorable impression by his cures with roots and herbs that the assembly of South Carolina appropriated a sum to purchase his freedom and to provide an annuity of one hundred dollars. The Massachusetts Magazine, vol. 4, pp. 103-104, 1792, carried a detailed description of the rules for preparation and administration of Caesar's antidote for poison and his cure for rattlesnake bite, two doses of which, the magazine stated, "never hath failed" to effect a cure.[4]

The first regularly recognized Negro physician was Dr. James Derham of New Orleans. He was born in Philadelphia circa 1757. With his master, Dr. John Kearsley, he learned to compound medicines and to assist with patients. After the death of Dr. Kearsley he was owned by Dr. George West, a British regimental surgeon, under whom he progressed further in medical work. He was transferred finally to Dr. Robert Dove at New Orleans who liberated him on easy terms in recognition of his medical ability. By about 1783, when he was twenty-six years old, he had built a practice in New Orleans estimated at $3,000 yearly.[5] Mott referred to him as "one of the most distinguished physicians in Louisiana."[6] Dr. Benjamin Rush said of Dr. Derham, "I have conversed with him upon most of the acute and epidemic diseases of the country where he lives and was pleased to find him perfectly acquainted with the modern simple mode of practice on these diseases. I expected to have suggested some new medicines to him, but he suggested many more to me."[5]

The exceptional case of Dr. Derham did not, however, establish a precedent which made for the acceptance of Negroes for medical training either by preceptorship or in schools. On the contrary, in the early nineteenth century the idea of training Negroes in medicine was generally frowned upon, particularly if they intended to practice in the United States, but if they indicated a desire to practice in Liberia their training would be undertaken.

DR. M. T. WHEATLAND,
whilom president of the National Colored Medical Association.

Thus we read of Charles H. Webb, a colored medical student in Winchester, Virginia, who sailed for Liberia, June 21, 1834. He had attended medical lectures in Washington under the sponsorship of the board of managers of the American Colonization Society. He sailed in the company of Dr. Robert McDowall, a colored physician from Scotland, and Dr. Ezekiel Skinner of Connecticut, who were under appointment by the board as colonial physicians. Webb had hoped to complete his training under physicians in the colony, but died in Monrovia four months later, October 20, 1834.[7]

Again we read of Washington Davis, "a young colored man, who has been for some time engaged in studying medicine and surgery, which profession he intends to practice in Liberia," addressing the Colonization Society meeting, May 29, 1835, in Musical Fund Hall, Philadelphia.[8]

In Georgetown, D. C., we read of the medical education of Dr. John H. Fleet, a talented colored youth who had attended the best white schools in Washington and, who by reason of his descent was also sponsored by the Colonization Society. His preceptor was Dr. Thomas Henderson, a former army surgeon and eminent practitioner, and he attended medical lectures at the old medical college at the corner of 14th and E Streets, Northwest. Doctor Fleet did not go to Liberia, however; nor did he enter wholly into practice; instead he opened the "Dr. John H. Fleet School" in 1936 and devoted the remainder of his life to academic and musical teaching.[9]

Although American medical schools were reluctant to accept Negro students, they could obtain training abroad. The first American Negro to obtain a formal medical degree was Dr. James McCune Smith of New York. He received from the University of Glasgow the A.B. in 1835, the M.A. in 1836, and the M.D. in 1837, and returned to New York in 1837, where he developed a highly successful practice and established two apothecary shops.[10] Like many other Negroes who have suffered under discrimination he felt it necessary to devote a significant portion of his energy to combatting the invidious racial inferiority myths. So we find coming from his pen such essays as "Comparative Anatomy of the Races" and "The Influence of Climate on Longevity, with Special Reference to Insurance." He was also a vigorous and able performer on the rostrum,[4] being said to have bested John C. Calhoun in 1843 in a public debate on the biological capacities of the Negro.[10]

The first Negroes to be graduated from an American school were Drs. John V. de Grasse of New York and Thomas J. White of Brooklyn, who received their degrees from Bowdoin College in Maine in 1849.[10,11] It is said they were expected to go to Liberia but did not do so. Dr. de Grasse was admitted to the Boston Medical Society in 1854 in recognition of his professional ability.[4]

An incomplete but useful picture of the advent of the Negro physician upon the American scene is thus provided. He encountered more than the usual difficulties not only in acquiring his training, but in gaining acceptance as a practitioner even among his own people.

Numerical Increase of Physicians

Among the early medical schools to accept Negroes as students were the University of New York, Harvard, Berkshire, in Pittsfield, Massachusetts; Caselton in Vermont; Rush, Eclectic in Philadelphia; and the Homeopathic College of Cleveland.[4]

Gradually, Negro physicians appeared in significant number. In 1850 there were 9 in New York City and 4 in New Orleans, with an additional 2 in the state of Louisiana.[4] There were at least 6 in Washington, D. C., in 1868 just after the Civil War.[12] By 1890, the number had increased to 909; in 1900 there were 1734; 3409 in 1910; 3885 in 1920; 3770 in 1930;* 3985 in 1932; and 3810 in 1942.[13]

This numerical growth of Negro physicians results only in small part from graduations from the regular

* U.S. Census figures.

medical schools. Most of them received their training at especially created institutions, of which there were at one time eight, of which only two now survive.

These schools were established as follows: Howard University Medical School, Washington, D. C., in 1868; Meharry Medical College, Nashville, Tennessee, in 1876; Leonard (Shaw) Medical School, Raleigh, North Carolina, in 1882; Louisville National Medical College, Louisville, Kentucky, in 1887; Flint Medical College, New Orleans, Louisiana, in 1889; Knoxville Medical College, Knoxville, Tennessee, in 1895; the Medical Department of the University of West Tennessee, Memphis, Tennessee, in 1900;[14, 15] and the Chattanooga National Medical College, Chattanooga, Tennessee, circa 1902.[16, 17, 18]*

Comprehensive data on the number of colored physicians graduated from Negro schools and from other schools are at present lacking, but a partial picture may be gained from the following reports:

In 1895, 27, or 7.0 per cent, of 385 Negro physicians tabulated by DuBois,[14] were graduates of schools other than the five extant Negro colleges. In 1905, 213, or 14.5 per cent of 1465 physicians listed by the same author, were graduates of other than the Negro schools. In 1934, Woodson[4] published data furnished by 1051 Negro physicians then in practice. Of these, 63.4 per cent were graduates of Negro schools, 22.1 per cent graduates of other schools, with 14.5 per cent unaccounted for (Table 1).

In recent years the number of Negro physicians graduating annually from schools other than Howard and Meharry has been small, actually less than 10 per cent of the total number finishing in a given year, and including about 10 to 15 individuals.

TABLE 1. MEDICAL SCHOOLS FROM WHICH 1051 NEGRO PHYSICIANS PRACTICING IN 1934 GRADUATED, BY PERCENTAGE (WOODSON)*

Negro Medical Schools

1.	Howard	20.4
2.	Meharry	28.1
3.	Leonard	11.4
4.	Flint	1.4
5.	West Tennessee	1.9
6.	Louisville	.25
	TOTAL, NEGRO SCHOOLS	63.45

Other Medical Schools

1.	Boston University	2.6	18.	American Medical College	
2.	University of Illinois	2.6	19.	Battle Creek Medical College	
3.	University of Michigan	2.2	20.	Bennett	
4.	Northwestern	1.5	21.	Cleveland Medical College	
5.	Ohio State	1.4	22.	Indiana College Medicine and Surgery	
6.	University of Pennsylvania	1.3	23.	Columbia	
7.	Chicago Hospital College of Medicine	.9	24.	Cornell	
			25.	Harvard	
8.	Long Island	.8	26.	Marquette	
9.	University of Iowa	.7	27.	Med.-Chirurg. Coll. of Philadelphia	
10.	Temple University	.6	28.	Yale	
11.	Boston College Physicians and Surgeons	.5	29.	Tufts	
			30.	McGill	
12.	Detroit College of Medicine and Surgery	.5	31.	Minnesota	
			32.	Western Reserve	
13.	Jenner Medical College	.5	33.	Queens	
14.	New York Homeopathic	.5		TOTAL @ .25% each	4.0
15.	Rush	.5		N.B. Schools in this column estimated at .25 per cent each to arrive at a numerical proportion. Exact percentages not stated by source.	
16.	University of Indiana	.5			
17.	University of Pittsburgh	.5			
	TOTAL	18.1			
	TOTAL, OTHER SCHOOLS	22.1			

TOTAL, NEGRO SCHOOLS	63.45
TOTAL, OTHER SCHOOLS	22.10
UNACCOUNTED FOR	14.45
	100.00

*Author's tabulation from C.G. Woodson, "The Negro Professional Man and the Community," 1934, pp. 85-87.

Defunct Negro Medical Schools

None of the six defunct Negro medical schools was adequately staffed, equipped, or supported and all had very unsatisfactory state board records (Table 2).

The record of all schools begins in 1903 and continues until their year of closure. In 1915, 574 Leonard graduates showed 47.2 per cent failures; in 1911, 124 Flint graduates, 55.6 per cent failures; in 1911, 29 Louisville National graduates, 62.1 per cent failures; in 1910, 45 Knoxville graduates, 69.0 per cent failures; and in 1923, 266 West Tennessee graduates, 63.2 per cent failures.

* Roman and Bousfield merely mention the school but furnish no information on it.

The most important of the defunct schools was the *Leonard Medical School* of Shaw University in Raleigh, North Carolina. It was founded in 1882 and closed in 1915. In its 33 years, it had 448 medical* and 126 pharmaceutical graduates.[17] The school was supported by the Northern Baptists; the North Carolina legislature donated the site for a medical building, a hospital of three wards and a dispensary, as well as a medical dormitory for 60 students. The school closed because of inability to meet rising standards. Flexner[15] stated that its income had gone outside to reimburse practitioners when it ought to have been spent within. He commented further that Raleigh could not maintain clinical teaching except at great expense.

Despite institutional handicaps, Shaw produced some eminent practitioners, of whom Dr. John A. Kenney, now of Montclair, New Jersey, a founder and editor of the Journal of the National Medical Association, and Dr. John P. Turner, Philadelphia police surgeon, are the best known. Both are past presidents of the National Medical Association. Dr. Lemuel Martin, Philadelphia radiologist, is the only Shaw graduate to have become a certified specialist.

The *Louisville National Medical College*, Louisville, Kentucky, was established as an independent institution in 1887 and closed in 1912. It had had 75 medical graduates in its 24 years** and gave also nursing and pharmaceutical training. Doctor H. Fitzbutler was its first president and founder. The

* Bousfield gives 448 as the total number of Leonard medical graduates. However, between 1903 and 1915 inclusive, 574 Leonard graduates took state boards. DuBois, *op. cit.*, p. 97, gives 184 as the number of Leonard graduates in 1905, subtracting from this the 110 examined by state boards in 1903, '04, '05, leaves 74 as the presumptive number of graduates prior to 1903. Adding this to 574 we obtain 648 or 200 more than Bousfield's figure. While some correction would have to be made for men who took boards more than once, there would also be graduates who never took a board.

** J. A. C. Lattimore, *op. cit.* DuBois, *op. cit.*, gives 83 graduates as through 1905. State board statistics indicate this figure was too high.

Flexner report cites a small and scrupulously clean hospital of eight beds as being connected with the school.

The *Flint Medical College* of New Orleans University in New Orleans, Louisiana, was established in 1889 and closed in 1911. It received support from the Methodist Episcopal church through the Freedmen's Aid Society, with a plant consisting of a three-story brick structure 22 by 114 feet. DuBois[14] listed 73 graduates through 1905. If to these are added 43 graduates who took state boards from 1906 through 1911, an unconfirmed total of 116 medical graduates is obtained for the 22 years of the school's life. Flexner described the school in 1909 as "a hopeless affair on which money and energy alike are wasted."[15]

Knoxville Medical College in Knoxville, Tennessee, was established in 1895 and possibly may have continued to 1909, the last year in which any of its graduates took state board examinations. From 1904 through 1909, 45 graduates were examined for licensure. DuBois[14] lists two graduates for the school after its founding in 1895, and states that it was soon discontinued. It is probable that this is true and that the institution was revived circa 1902 or '03, because no graduates were examined in 1903, the first year for which state board results were published. It may be said that the school had 47 known graduates during its 14 years of apparent existence.

Flexner[15] reported that the school occupied a floor above an undertaking establishment, that it was without laboratory, dispensary and clinical facilities, but that twice a year a few students might be taken to the Knoxville college hospital. He described the catalogue of this school as a "tissue of misrepresentations from cover to cover."

The *Medical Department of the University of West Tennessee* was organized in 1900 and continued until 1923. The school was found in 1909 to have meager equipment for chemistry, pharmacy, and microscopy, but otherwise its rooms were bare. The students were said to have access to eight or ten beds twice weekly in a small hospital close by. A dispensary, without records, was in the school building. The state board records indicate that 268 graduates of this institution took examinations during its existence of 23 years.

Flexner referred to the school as "without merit," language unfortunately severe, for it fails to differentiate between the drives behind an institution of this kind and schools of the cheap commercial type which the distinguished investigator pilloried so effectively.

THE LATE *Dr. Daniel Williams was inducted into the American College of Surgeons at its organization in 1913. Dr. Williams performed one of the first successful operations on the human heart.*

The founder and president of West Tennessee was Dr. Miles Vandahurst Lynk, still active at 76. His works show Dr. Lynk to have been a man of high purpose who wrought well within the limitations of his background and environment. In addition to establishing a school, he urged the formation of a national medical organization of colored physicians, and the National Medical Association was founded soon after. He founded and edited the first Negro medical journal, *The Medical and Surgical Observer*, a monthly which first appeared in December 1892 and ran for eighteen months. In recent years he even organized the alumni of his institution for "constructive ends." One cannot but admire the determination which, in the face of the inevitable, kept a school of this type alive so long.

Of the short-lived *Chattanooga National Medical College* we have little information beyond its being listed as having had 9 students in the session of 1903-04 and one graduate in 1904.* There is no record of graduates having taken any state board examinations. Doctor T. W. Heighler was its first president.

These Negro medical schools which have ceased to exist were not *unique* products of a day when it was easy to establish a medical school and entrance requirements were nominal. Considering their resources, there is less wonder that of the 1038 of the graduates of these schools who took state boards, 53.7 per cent failed, than that that 481 passed.

Howard and Meharry

We come now to Howard and Meharry, the two oldest Negro medical schools, which today and for a long time have carried an undue share of the work of training Negro physicians. Of the two, Howard has enjoyed somewhat more auspicious circumstances both for establishment and development, but the struggles of both have been hard and continuous, for the maintenance not only of standards, but of existence.

Howard opened her doors November 9, 1868, with eight students and five teachers, of whom one, Dr. Alexander T. Augusta, demonstrator of anatomy, was a Negro. The University had been chartered March 2, 1867: the stated purpose of the medical department was "to assist (the) agencies already at work in the relief of ignorance and personal suffering in the District of Colombia and in the country at large."[19]

Howard had the advantages of location in a large city, the national capital, and of being initiated by a group of able and representative citizens with a keen sense of moral obligation, and of securing assistance very early from the federal government.

Meharry had a more difficult beginning. Shortly after the Civil War, five Irish brothers, with a desire to contribute to the reconstruction of their area of the South, contributed the sum of $15,000 to the Methodist Episcopal church for the establishment of a school for the "training of Negro youth in medicine."[20] One of these brothers, the Reverend Samuel Meharry, had been befriended in time of need while a young farmer by a Negro who had shared his home with him.

At about the time the Meharry brothers were considering the bequest, a serious religious Yankee of 21, George Whipple Hubbard, arrived in Nashville on the day of the armistice to fight in the Union Army. He decided instead to stay to teach the freedmen and at the same time to study medicine. At the conclusion of his medical course at Vanderbilt, he offered his services to the Methodist church to train Negroes for medical courses. He then learned for the first time of the Meharry brothers' bequest. The Central Tennessee College, a Methodist school for Negroes, had been planning a medical department because "the difficulty of securing proper medical attention for the colored people was very great and the mortality among them alarming."[16] So Meharry opened in 1876 as the medical department of Central Tennessee College, with Dr. George Whipple Hubbard, as dean and faculty. The name was changed to Meharry Medical College of Walden University in 1900, and with the decline of the university has had a sepa-

* J. Am. Med. Assn., 1904 v. 43, p. 505.

rate corporate existence since October 13, 1915, as Meharry Medical College.[16]

The first class of five Negro boys was taught by Dr. Hubbard in an old frame building which had been a barn. He had to teach them everything, "even their A B C's."[20] On the opening day, a retired Confederate army surgeon, Dr. W. J. Sneed voluntarily associated himself with Dr. Hubbard in his work.[20] Thus at Meharry from the beginning, North and South united in developing medical education for Negroes.

Although both Howard and Meharry were initiated and have been maintained for high altruistic purposes, both have had essentially the same kind of difficulties, but because Meharry's isolation was greater and its funds less than what until very recently have been the meager allotments for Howard, its lot has been somewhat harder.

It is not to be assumed, however, that even in the beginning, the noble purpose and distinguished figures associated with Howard were able to secure for it the approval and respect of the medical profession. Ridicule and contempt emanating in part from the jealousy of a sister school in Washington were quickly pointed at the institution and the white physicians who dared associate themselves with it.[12]

Fight for Professional Recognition

In that day as in this there were men of courage and ability who did not believe that color should be a determinant of professional recognition. These men stuck by Howard and in addition espoused the cause of the well-qualified Negro physicians who sought entrance to the Medical Society of the District of Columbia.

On June 9, 1869, Dr. Charles B. Purvis, a graduate of Western Reserve Medical School and later surgeon-in-chief of Freedman's Hospital, and Dr. Alexander T. Augusta, the Negro member of the original Howard faculty already mentioned and breveted-out a lieutenant colonel in the Medical Corps of the United States Army, were proposed for membership in the Medical Society of the District of Columbia and on the 23rd of the same month Dr. A. W. Tucker was also proposed. All three were reported eligible but failed of election. There ensued a bitter controversy which was carried to the floor of the United States Senate and the American Medical Association.

In the Senate Senator Charles Sumner of Massachusetts offered on December 9, 1869, a resolution to inquire into the expediency of repealing the charter of the Medical Society of the District of Columbia in order "to secure for medical practitioners equal rights and opportunities, without distinction of color." At that time in Washington colored doctors could not attend medical meetings of the District Medical Society and its members would not accept consultation with them, although they would and did take their patients.

Full hearings were held on the resolution and the allegations were confirmed. On February 8, 1870, Senator Sumner introduced S.511, a bill to repeal the charter of the Medical Society of the District of Columbia. The bill was brought into the Senate four times but was by-passed.

On December 18, 1871, a repeal bill was introduced in the House but never reported out of committee and on April 9, 1890, a third repeal bill was introduced by Senator Dolph, without result.

The fight on the exclusion principle was then carried to the American Medical Association which held its twenty-first annual meeting in Washington, May 3 through 6, 1870. The sides came to grips in the following way:

Since colored physicians had been barred from the District Medical Society, they together with white members of the Howard faculty and a liberal minority of the District Society formed a new organization called the National Medical Society, January 15, 1870. This was what might be called today an "interracial" society. It made no fetish of race, however, but simply admitted qualified physicians, regardless of race or *sex*.

It became the desideratum, therefore, for the National Medical Society to have its delegates officially recognized at the AMA convention.

The Medical Society of the District of Columbia filed a protest against the seating of National Medical Society delegates. Dr. Robert Reyburn, of the latter society, who was described by a faculty member of Georgetown medical college as "our best man," meaning ablest professional, filed a counter-protest against seating delegates from the District Society.

By parliamentary maneuver, the National Society delegates were denied seating until charges against them were reported upon. This was delayed until the final day, when, on grounds that the National Society had in essence acted in contempt of the District Society, its delegates were denied recognition.

In this procedure the color question never appears openly, but the proceedings show it was obviously the real issue. To whitewash the entire matter, Dr. R. H. Storer introduced a resolution supporting the excluding report because "it has been distinctly stated that the consideration of race and color had had nothing whatsoever to do with the decision of the question of the reception of the Washington delegates." After some debate, the resolution was passed.

Thus on technical grounds the American Medical Association vindicated the local racial exclusion policies which have remained entrenched in many areas until this day.

The true picture of this critical session of the AMA cannot be obtained from Doctor Fishbein's recent official *History of the American Medical Association* but the facts are set down in a little book *The First Negro Medical Society*, published by the writer in 1939.[12]

Medical Progress

It becomes clear that despite the urgent need for his professional services, obstacles and opposition at every step have faced the Negro in getting established in the medical profession. These have not ended with the formal education leading to the medical degree. Racial bars are and from the beginning have been encountered in securing internships, residencies, and hospital staff appointments for practitioners. In addition, in the country as a whole hospital facilities have not and are not equitably available to Negro patients. But this is not all.

The tremendous advances in medical science which the twentieth century has witnessed have resulted in enormous financial outlays for great medical centers and research institutions and in a continuous elevation of standards of qualification at all levels from pre-medical to specialist. This progress has had the effect of rendering rapidly obsolete the meager training and service assets which the Negro has won with such hard efforts. He has been in the position of always trying to catch up, of no sooner attaining one required objective to find a new and more exacting one to be met.

It was apparent after World War I that even the two surviving Negro medical schools would have to have new plants and better trained staffs if they were to retain their accreditation. Meharry has had to undergo the embarrassment of temporary probation. Doctor Mordecai Johnson in his first major task as president of Howard University found the completion of a campaign for funds for a new medical building paramount and made free acknowledgement of the fact that Howard was retaining its A-rating in

the mid-twenties only through expectant courtesy.

In this exigency it was natural that the philanthropic foundations should enter the picture. In 1928 Mr. Edwin R. Embree, president of the Julius Rosenwald Fund, wrote that health, including the development of the medical and biological sciences and their application to human welfare, had become the most fashionable field for philanthropic work.[21] In the early twenties neither Howard nor Meharry could qualify for grants of the type then being made for the development of the great medical centers which are the commonplace of our day. The prime needs of the Negro schools were for modern plants and properly trained faculties. It was for these purposes that the foundations began to supply assistance. The same general pattern, with certain significant differences, was followed in connection with both schools.

Meharry was the first to enter upon a program. It was president John J. Mullowney's idea to select one or two promising men from each graduating class where possible and send them away for training at outstanding institutions, for which he would personally secure openings, with the understanding that the men would return to Meharry.

Under this plan, through the aid of a Rosenwald fellowship, Dr. William S. Quinland, Meharry, '14, spent the years 1919-22 in advanced study in pathology at Harvard. Dr. Quinland returned to Meharry where he became professor of pathology and remained until 1947, resigning to accept a position with the U. S. Veterans Administration after a quarter century of fruitful service.

In 1922 the General Education Board began its contributions through a fellowship to Dr. Michael J. Bent, who pursued study in bacteriology, first at Columbia and later at Harvard. He returned to become professor of bacteriology at Meharry, and since 1941 has been dean of the school.

Subsequent General Education Board fellowships, continued to the present, have provided for the advanced training of 34 physicians or instructors for service on the Meharry faculty. All but about four of these have been graduates of the school. (Table 6-A.)

It is one of the hitherto unsung contributions of Dr. Ernest Everett Just, late professor of zoology at Howard University, that he initiated the first attempt to secure thorough modern training for members of the Howard medical faculty. Chiefly through his representations, the National Research Council awarded three fellowships to Howard medical graduates with the end in view that they would return to Howard for careers in teaching and research.

In 1923 Dr. Lloyd H. Newman entered upon a two-year period of training in biochemistry at Harvard. The two other recipients of NRC fellowships studied at Columbia in physiology and radiology, respectively, but did not find Howard prospects sufficiently inviting when their training was completed to join the faculty.

Still acting informally, Just later persuaded an instructor in his department, Roscoe L. McKinney, to undertake graduate study in anatomy with the object of a full-time appointment on the Howard medical staff. With the cooperation of Howard president J. Stanley Durkee and the late dean Edward A. Balloch, a General Education Board fellowship was secured through which he obtained the Ph.D. in anatomy from the University of Chicago in 1930. In that year he was appointed professor of anatomy at Howard, a post he continues to hold.

In 1927, at the invitation of president Durkee and the board of trustees of Howard University, Dr. Fred C. Zapffe, secretary of the Association of American Medical Colleges, made a critical survey of the School of Medicine and recommendations for its future development. These served as the basis for the program actually followed.[22] The General Education Board had previously agreed to give $250,000 for the construction of a new plant if the university would raise a like amount and now it agreed to a series of training fellowships similar to those instituted for Meharry.

Dr. Mordecai Johnson found as his first major task on accession to the Howard presidency in 1927 the completion of the campaign for the university's half of the $500,000 for the new medical plant. This was done successfully.[22] The work of building a well-trained faculty fell to the lot of Dr. Numa P. G. Adams, who was appointed dean of the School of Medicine upon the retirement of Dr. Balloch in 1929. Dr. Adams, a Howard college alumnus and honor graduate of Rush Medical School, was Howard's first colored medical dean. He at once embarked upon a very ambitious program.

Adams vs. Mullowney

Here it is necessary to describe certain fundamental differences between Adams' approach and that of Mullowney at Meharry. Dr. Mullowney had been a missionary in China and regarded his stewardship at Meharry as "semi-missionary work."* His own words best describe the way in which he looked upon his program for training a faculty.

> Ever since coming to Meharry, a certain question came bobbing up. I wanted to experiment. The question was this. If Negroes were given the same facilities, equipment and teaching, could they do the same grade of mental work as white men who had approximately the same opportunities?
>
> I believed that they could, but that was merely belief. I could see no reason, biologically speaking, to prevent their attaining the same degree of mentality as white men. I thought the time propitious to make the test. It would take several years. I enlisted the interest of Dr. Abraham Flexner, then Secretary of the General Education Board, in my experiment. He encouraged me. Having selected one or two of the best men in each senior class, if we gave them training that would compare favorably with the given young white medical teachers, would they measure up the same as the white teacher?
>
> . . . . . .
>
> While not all of the twenty-eight young men who were awarded scholarships have measured up to their responsibilities and opportunities, at least 75 per cent of them are still teaching. Surely that warrants the continuance of the experiment. I believe that the percentage of efficiency is nearly as good as can be found in any race, factor for factor, environment for environment, age for age. No experiment ever gives one hundred per cent proof."**

In the twentieth century one cannot be too severe with Dr. Mullowney for such views if one recalls how he found Meharry and his early experiences there with raising standards, such as anonymous threats and the stoneing of Dr. Bent's home and person because several students were flunked.[20]

Dr. Adams, however, a man of quiet brilliance and sagacious courage, and himself a Negro who knew the sting of conventional attitudes, had no traffic with questions of inherent capacity or missionary attitudes. He set out to build a medical school which would be first class by any standards. He knew this would require both a faculty and student body of high caliber and that colossal efforts would be necessary to obtain each. He knew also that his work would probably receive little appreciation even if successful and never was a man more right.

Adams' method was to recruit both faculty and student body from the best sources that could be found irrespective of where they were. Instead of limiting his faculty prospects to Howard men, Adams combed the country for young Negroes of exceptional promise either in medical school or recently graduated. Consequently, the men he selected for

* Mullowney, *op. cit.*, p. 87.
** *Op. cit.*, pp. 136-138.

Table 6. - NEGRO RECIPIENTS OF FELLOWSHIPS FOR ADVANCED STUDY PREPARATORY TO TEACHING POSITIONS

A. MEHARRY MEDICAL COLLEGE

Rosenwald Fellowships

	Fellow	Institution	Field	Year
1.	William S. Quinland**	Harvard	Pathology	1919-22

General Education Board or Rockefeller Fellowships

2.	V. G. Tolbert **	Univ. of Pennsylvania	Anatomy	1929-30
3.	D. T. Rolfe	Univ. of Chicago	Physiology	1928-30
4.	Edward S. Lee**	Harvard	Physiology	1940-41
5.	H. D. West	Univ. of Illinois	Biochemistry	1935-37
6.	Marion Zealey*	Univ. of Minnesota	Biochemistry	1947-
7.	J. R. Cuff	Western Reserve	Pathology	1942-43
8.	Michael J. Bent	Columbia	Bacteriology	1922-24
9.	J. A. Bone **	Univ. of Illinois	Pharmacology	1928-30
10.	Charles Smith**	Univ. of Pennsylvania	Pharmacology	1929-30
11.	T. A. LaSaine	Univ. of Toronto	Public Health	1937-38
12.	P. H. Miller**	Harvard	Public Health	1931-32
13.	R. T. Smith	Univ. of Rochester	Medicine	1939-40
14.	A. W. Plump **	Univ. of Pennsylvania	Medicine	1929-30
15.	W. A. Patterson	Tufts College	Medicine	1944-45
16.	E. C. Nash	Univ. of Chicago	Medicine	1944-45
17.	W. H. Grant	Univ. of Minnesota	Medicine	1933-35
18.	W. A. Beck **	Harvard	Medicine (Chest)	1929
19.	O. A. Brothers *	Univ. of Rochester	Medicine (Cardiol.)	1947-
20.	E. P. Crump	Univ. of Minnesota	Pediatrics	1942-43, 1946-47
21.	W. H. Faulkner**	Harvard	Pediatrics	1941
22.	J. W. Jones **	Harvard	Pediatrics	1928-30
23.	Matthew Walker	Howard	Surgery	1938-39
24.	J. L. Hicks **	Univ. of Pennsylvania	Surgery	1929-30
25.	G. W. Hilliard	Howard	Surgery (Chest)	1945-47
26.	S. H. Freeman	State Univ. of Iowa	Orthopedics	1935-36
27.	A. A. Williams	Harvard	Urology	1943-44
28.	E. F. Alleyne **	Univ. of Vienna	Obs. and Gyn.	1926-27
29.	Carr A. Treherne	Cornell Univ.	Obs. and Gyn.	1945-46
30.	R. Hernandez **	Columbia	Neur. and Psychiatry	1928-30
31.	W. L. Silcott	Univ. of Colorado	Neur. and Psychiatry	1938-40
32.	C. E. Dillard **	Univ. of Michigan	Radiology	1928-30

National Research Council Fellowship

33.	Margaret Lawrence*	Columbia	Pediatrics	1947-

Cancer Research Fellowship

34.	L. D. Scott	New York University	Radiology	1938-40

* On Leave
** No longer at Meharry Medical College

fellowship training represented not only ranking students from Howard classes, but graduates of a number of northern and western medical schools.

Of equal concern to him was the quality of the student body and he went to endless pains to try to select first-rate classes, with the result that when a class could not be filled with obviously well-qualified applicants, he reduced the size of that class. This policy gave rise to a hue and cry that Howard ought to train more doctors, no matter what, and furthermore that he was prejudiced in favor of graduates of "white" as against Negro colleges.

It is clearer now even than in Adams' time that our segregated system

of education is an inferior one, that it will produce a very limited amount of satisfactory premedical material, and that no useful end is served by attempts to make a scapegoat of a responsible official attempting to discharge his duties according to the proper standards.

Dr. Adams also had sound concepts as to Howard's role in medical research, not as a side-pocket activity, but as one of full participation in the main stream of scientific advance. There is no less doubt that the difficulties he constantly confronted shortened his life than that his work was a contribution of major import to the American people and to the "concept of democracy."

In all 28 physicians and instructors were trained for faculty appointments at Howard through the aid of fellowships from the foundations. (Table 6-B.)

Everyone familiar with the widespread attitude that the Negro is not expected to aspire to reach the top, but is expected nevertheless at lower levels to do actual work for less money, will appreciate two additional contributions of Numa Adams.

None of the Meharry physicians who were sent away for further training obtained advanced degrees. Possibly it was not thought necessary. Dr. Adams, however, strongly encouraged each of his physicians on fellowship to fulfill the requirements for an advanced degree, either the Ph.D. or its equivalent. This he rightly felt would ensure more disciplined study, assure the preparation and publication of at least one reputable piece of scientific research and command greater respect both for the men and the Howard faculty. All the men trained in preclinical fields obtained either the Ph.D. or its equivalent and one did so in a clinical field, although in the latter the work does not as readily lend itself to qualification for an academic degree. This is a monument to Adams.

Table 6. NEGRO RECIPIENTS OF FELLOWSHIPS FOR ADVANCED STUDY PREPARATORY TO TEACHING POSITIONS (Continued)

B. HOWARD UNIVERSITY SCHOOL OF MEDICINE

National Research Council Fellowships

	Fellow	Institution	Field	Year
1.	L. H. Newman (M.D.,Howard,'21)	Harvard	Biochemistry	1923-25
2.	H. L. Pelham (M.D.,Howard,'23)*	Columbia	Physiology	1924-26
3.	R. Fisher (M.D.,Howard,'24)*	Columbia	Radiology	1925-27
	General Education Board Fellowships			
4.	R.L. McKinney (A.B.,Bates'21)	Univ. of Chicago	Anatomy	1928-30
5.	W. M. Cobb (M.D.,Howard,'29)	Western Reserve	Anatomy	1930-32
6.	M. W. Young (M.D.,Howard'30)	Univ. of Michigan	Anatomy	1932-34
7.	J. L. Johnson (B.S.,Penn State,'19)	Univ. of Chicago	Physiology	1929-31
8.	E. G. Weir (S.B., Chicago,'30)***	Univ. of Chicago	Physiology	1934-36
9.	V. A. Wilkerson (M.D.,Iowa,'25)	Univ. of Minnesota	Biochemistry	1930-32
10.	H. A. Poindexter (M.D., Harvard,'29)**	Harvard	Bacteriology	1930-32
11.	A. H. Maloney (M.D., Indiana,'29)	Univ. of Wisconsin	Pharmacology	1929-31
12.	P. B. Cornely (M.D., Mich.,'31)	Univ. of Michigan	Public Health	1932-34
13.	R. S. Jason (M.D.,Howard,'28)	Univ. of Chicago	Pathology	1929-31
14.	E. E. Collins (M.D.,Iowa,'33)**	Western Reserve	Pathology	1934-36
15.	C. R. Drew (M.D., McGill,'33)	Columbia	Surgery	1936-40
16.	J. R. Laurey (M.D.,Wayne,'33)	Univ. of Michigan	Surgery	1939-41
17.	B. Syphax (M.D.,Howard,'36)	Univ. of Rochester	Surgery	1940-41
18.	J. B. Johnson (M.D., West. Res.)	Univ. of Rochester	Medicine	1939-41
19.	R. K. Brown (M.D.,Howard,'38)	Univ. of Penn.	Medicine	1943-45
20.	H. M. Payne (M.D.,Howard,'31)	Phipps Institute	Medicine (TB)	1936-37
21.	T. C. Simmons (M.D.,Howard,'33)	New York Univ. Cook County Hosp., Chicago	Obstetrics and Gynecology	1939-41
22.	E. Y. Williams (M.D.,Howard,'30)	Columbia	Neurology and Psychiatry	1931-33
23.	J. M. Hope (M.D.,Penn.,'34)	McGill	Neurology and Psychiatry	
24.	C. Prudhomme (M.D.,Howard,'35)	Provident Hosp., Chicago	Neurology and Psychiatry	1937-38
25.	K. A. Harden (M.D., Mich.,'31)	Bellevue	Medicine (TB)	1944-45
26.	C. S. Greene (M.D.,Howard,'36)†	McGill	Neurosurgery	1946-48
27.	L. G. Wheeler (M.D.,Howard,)	New York Univ. Boston Univ. Oberlander Fellowship	Ob. Gyn.	1945-47
28.	C. W. Freeman (M.D.,Howard,'26)	Vienna	Dermatology	1933-34

* Did not join Howard staff
** No longer at Howard University School of Medicine
† In training
*** Resigned

Promotions and Salaries

Certainly, however, some of the authorities who had responsibility for training these men resented the idea of a Negro acquiring an advanced degree in addition to the M.D. The writer recalls in his own case that an influential but secondary member of his Ph.D. committee tried to discourage him from registering for the degree with the following words: "What do you want another degree for? You don't need that for what you've got to do at Howard. I've been down there and know what you've got and what you need. All you need to do is come out here and take some of our courses, try to learn how we run things and go back down there and do the best you can."

It is common knowledge that in medical schools generally the salaries of full-time highly trained physicians have traditionally been much lower than the potential income from private practice. For this reason many schools have had difficulty in holding their best men. The fact that as recently as 1947 a survey showed Howard to have the lowest top salaries of any medical school replying, and that Meharry's salaries were lower than Howard's, would occasion no surprise. Consequently both Meharry and Howard have had difficulty in holding men on a strictly full-time basis, even after they have been trained.

When Dr. Adams embarked upon his training program for the Howard faculty, he was well aware that a decent salary and promotional outlook would have to be offered his prospects and he in consequence set up a respectable though certainly modest plan. It is of considerable interest that significant pressure was put upon him not to institute such a scale because it would be considerably above what Meharry could afford and would create dissatisfaction there. There were also implications that the Negro schools ought not yet to expect to come abreast of other institutions in the matter of salaries.

Unfortunately, Adams' plan never got beyond the first step because of the depression and other external developments, and only recently, after much agitation, has there come the realization that Negroes like other people are due first-class pay for a first-class job and measures to achieve that end have been instituted.

In respect to new plants for Howard and Meharry, the foundations have made timely and significant contributions.

The present building of the Howard University College of Medicine was completed in 1927 at a cost of $500,

000. Half of this amount was contributed by the General Education Board and half by the alumni and friends of the university. Fifty-one alumni, two families of alumni, one alumni club and two Negro medical organizations made gifts of $1,000 each. The General Education Board made additional grants for equipment and other items to bring its total contribution to $380,000.[23]

Meharry's new plant, including medical, dental and hospital buildings, was completed in 1933 at a cost of over $2,000,000. The General Education Board gave $1,500,000 of this amount; the Rosenwald Fund, $250,000; Mr. George Eastman, $200,000 for the dental school; Mr. Edward Harkness, $50,000; Nashville contributors, $35,000; and the alumni $18,000. Dr. Mullowney cites that some years earlier the alumni had given $200,000 to an endownment fund.[20]

While the General Education Board devoted its benefactions to medical education, the Julius Rosenwald Fund brought officially to a close in 1942 a fifteen-year program in Negro health in other areas. It had expended during this period a total of $1,613,000.[24]

This sum was used for "(1) the development of Negro hospitals as demonstrations in excellent care of the sick and as centers for the advanced education and practical experience of colored physicians and nurses; (2) the training of special personnel and their placement in strategic positions in hospitals and government health projects; (3) cooperation in demonstrations for the control of syphilis, tuberculosis, and maternal and infant mortality; (4) fostering of health centers; (5) influencing government agencies, voluntary health organizations, and public opinion generally toward better health services for Negroes."[24]

About 16 hospitals and clinics throughout the country received contributions from the Rosenwald Fund but support was concentrated principally upon three Negro hospitals: Provident in Chicago, Flint-Goodrich in New Orleans, and the John A. Andrew Memorial Hospital at Tuskegee.

We may have three points of present interest in the contributions of the philanthropic foundations to Negro health needs. First, this aid, representing as it did but a minute portion of the huge sums poured into the health field, may be granted to have served useful and expedient purposes, at the time it was given, in certain areas. Second, the day of the foundations as major support for health enterprise is generally recognized to be coming to an end.[25, 26] Third, the foundations in their approach and operation worked entirely within the framework of and did nothing to disturb the segregative patterns in American life. As we enter now upon a period in which it seems to be agreed that public, and particularly federal, funds will have to be used to provide, in one way or another, basic financial support not only of professional educational institutions and activities, but of health facilities and programs of all sorts, it becomes of vital importance to see not only that needs are met, but that they are met in accordance with the principles upon which our republic is founded. The evidence shows, moreover, that it is only by following these principles which guarantee all citizens equal justice under law, without discrimination for race, sex, creed, color, or national origin, that the needs can be met.

Production of Physicians

In a recent address Dr. Thomas Parran, the retiring Surgeon General of the United States Public Health Service said, "We are producing our present annual output of doctors in this country not by plan but by happenstance. The number has no relation to anything I can discover except the present physical and financial capacity of existing medical schools."[27]

When Tables 3 and 4 showing the annual number of physicians graduated by Howard and Meharry since their establishment, singly and combined, are studied, the particular pertinence of Dr. Parran's statement to the production of the majority of Negro physicians is apparent. Figure 1 in which the data are graphed makes the facts even more striking.

We note first (Table 4) that the annual number of graduates is less than previous estimates have assumed. From Howard's first class of five in 1871 and Meharry's single graduate in 1877 up to and including 1947, there has been but one year in which the combined output of the two schools exceeded 125 physicians. In that year, 1944, Meharry graduated two classes as a result of its "accelerated program" during the war, and a total of 190 were produced by both schools. In only one other year, 1946, did the combined output equal 125.

The graph in Figure 1 reveals a number of interesting features which cannot be explored here. Most conspicuous is the marked fluctuation in the sizes of the graduating classes of each school, compared with itself, and the disparity between those of the two schools when compared with each other, particularly over the period from 1899 through 1925.

If an institution has relative stability in admission policies, quality of student body, curriculum standards and facilities, it would graduate approximately the same number of students each year, and, plotted on a graph as in Figure 1, its curve would be a nearly horizontal line. The zig-zags of Figure 1 carry significant implications as to what the two schools have been like and sheds some light on their interrelationships. This interesting medical history must be dealt with later.

When the data from Table 3 are compared with those of Table 1 of our previous review,[1] some new information is obtained. We see that for the years over which the record is available, 1903-1946, 439 more Howard graduates took state board examinations than were graduated during that period. For Meharry the excess was 1,350, and for both schools 1,789. This means crudely that over the forty-three year period of the record, about 25.8 per cent of Howard graduates, 54.3 per cent of Meharry graduates, and 42.7 per cent of the graduates of these two schools had to take a state board more than once befor they could satisfy the minimal requirements for a license to practice. A small deduction must, of course, be made for a few individuals who failed boards more than once.

This casts no reflection upon the unselfish, devoted and tireless efforts of the many workers of both races who have labored to do a job with our two surviving Negro medical schools, nor does it detract from the improvements, somewhat heroically achieved, of recent years.

It does add weight, however, to the already conclusive evidence that the jim-crow preliminary educational system and the Negro medical schools, extant as well as defunct, which have trained the majority of Negro professionals, constitute a shameful example of national neglect and inadequacy.

There is no comfort in the facts that numerous graduates of colored medical schools have proved themselves of high caliber and competence by any standards, that individual colored graduates of leading medical schools have been conspicuous for their mediocrity, or that prior to the reform following the Flexner report in 1910, nigh a hundred low-grade white medical schools were turning loose large numbers of poorly trained white physicians on a helpless population.

The majority population and profession have had the resources to develop men and facilities to keep progress in health improvement uninterrupted and to raise standards high enough to offset in large measure the

presence of a mass of practitioners of sub-standard training. But the Negro, because of discriminatory practices in medical schools, hospitals, and medical organizations, has been able to profit only to a limited extent from the benefits of modern knowledge and facilities. This is reflected in his health status.

Now that informed public opinion has become alerted to this health situtation and its causes, there are many evidences of a sincere desire to "do something." Those with proposals for improvement, however, seek to work inside the segregated system and show a reluctance to attack a system which is itself obviously a "blind alley."

We hear pressing demands that Howard and Meharry expand their medical and dental schools at once, so as to turn out more doctors and dentists to meet the shortage. This would be no answer.

Unless the premedical college training is improved, more students will mean poorer quality. College achievement in turn depends upon good high-school education and this upon a sound primary foundation. Students of proper caliber in the necessary quantity cannot be produced by the jim-crow system. The South is less able than any other section to afford one good educational system, much less two. In the attempt, whites as well as Negroes suffer. The President's Commission on Higher Education recognized all this and has recommended the abolition of segregated practices in education.[28]

Autumn registration in 1947 indicated a total of 82 colored students in 20 northern and western medical schools.*[30] Howard had an enrollment of 276, with a freshman class of 75, and Meharry an enrollment of 231, including 55 in the first year. The 507 students in the two Negro schools plus the additional 82, make a total of 590 doctors in training. There are approximately 25,000 medical students in the country. If Negro students were enrolled in proportion to population percentage, there would be approximately 2,500. This would be according to the basis on which the Army was reported to have ceased accepting Negro enlistments.

A deficit of nearly 2,000 students in medicine alone, exclusive of dentistry and pharmacy, is highly significant. More significant, however, is the fact that out of 1,351 applicants for 74 places at Howard last year and 800 at Meharry, of whom 55 were admitted, only about 200 approximated the qualifications of the group accepted. This means that properly qualified applicants are not the average product of the segregated institutions in which the majority of these students receive premedical training and derives from the handicaps of teaching personnel, poor facilities, and the meager financial support under which most of these institutions labor.[2]

The fundamental evil is the dual educational system which gives the Negro unequal and inferior facilities and training from the first grade on. We cannot hope for substantial improvement until it is eliminated.

Meharry Crisis

The bulk of the Negro population and hence their need for health services and personnel are still concentrated in the South. Twenty-six of the nation's medical schools, constituting more than one-third of the total medical training facilities in this country, including some of the nation's best plants, are located there. Yet these 26 schools have never opened their doors for the training of any Negro health personnel. Instead, they have permitted a poorly-financed Negro institution in their midst to carry, down the years, the major burden of their responsibility, without help from the area it served. Since Meharry Medical College was established in 1876 it has contributed the major portion of Negro physicians who have gone to practice in the South.

In this school's recent financial extremity we do not find the Southern Governors' Conference recognizing the long-time injustice and their responsibility to their Negro population by opening the doors of their 26 medical schools and bolstering Meharry as a training institution for doctors of any complexion. Instead, we see the deplorable spectacle, on the one hand, of an offer to keep Meharry alive by trying to take the South's responsibility for training Negro medical professionals off its hands and to perpetuate traditional discrimination; and on the other, the Meharry Trustees offer the school as an outright gift. One is puzzled to know why this act was so swift; to know why those in control of Meharry policy did not put up a fight long enough to allow the facts to become well-known and publicized, and to marshall a nation-wide opinion against the shameful situation. Particularly, one wonders, why there were no urgent attempts to mobilize progressive thinking among the younger elements of southern citizens.

The compact on regional education entered into between the southern states at Tallahassee, Florida, February 8, 1948, is as inglorious a blow as has ever been delivered to Negro self-respect. Its language shows clearly that Meharry is the real reason for the regional idea, prompted undoubtedly by a desire to dodge the decisions of the U. S. Supreme Court in the Gaines and Sipuel cases. The phrasing provides for no Negro representation on the controlling board and would place the future of Negro health in the South more firmly than ever at the whim of white political control.

We are willing to admit that it would be better for Meharry to have to close, and its production of Negro doctors temporarily interrupted, than to sell our birthright for a mess of pottage. The history of the labor movement is a triumph of the willingness to sacrifice for principle. Can the "noblest profession" show less fortitude than the organized worker?

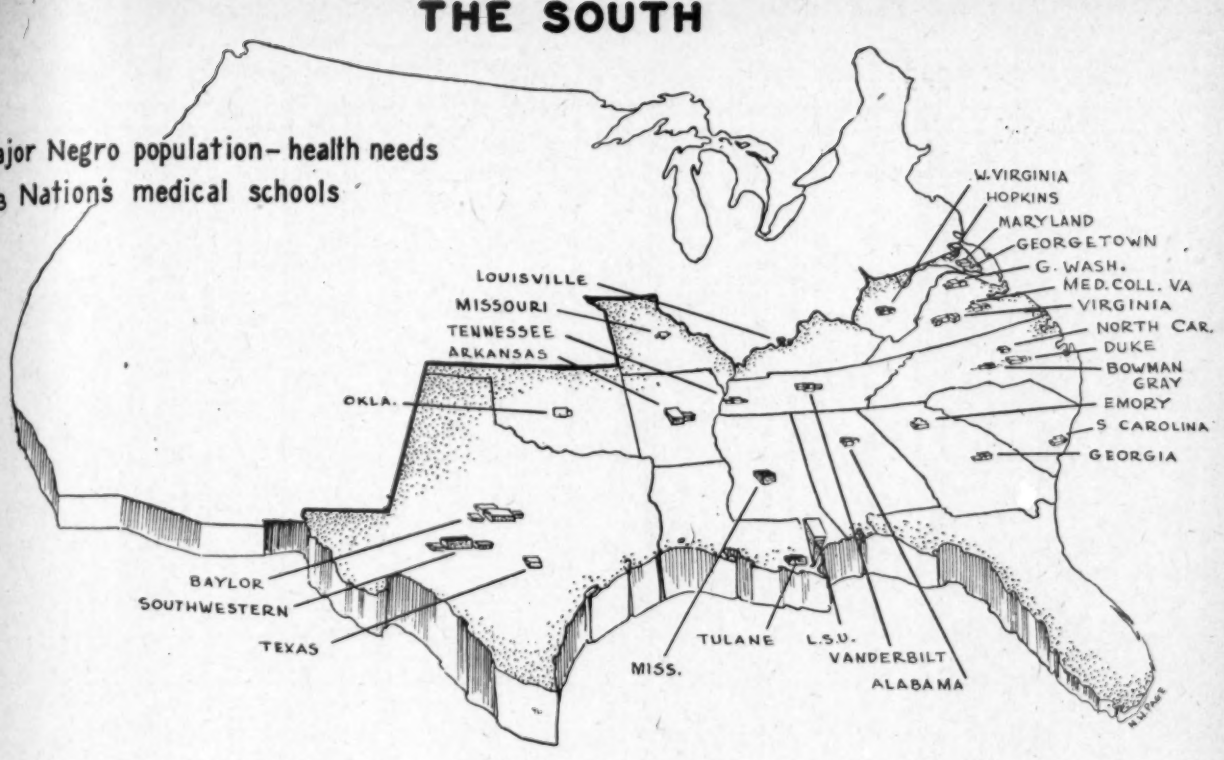
Meharry is not the only medical school with financial problems. There are indications that the whole scheme of financial support for our medical schools will have to be revised in the direction of greater support from public funds, possibly federal. In the interim could not the Methodist Episcopal church or the great foundations find funds to maintain Meharry while the major campaign against segregation on the national front is being waged?

Case Against Discrimination

It would be difficult to improve upon the language of the President's Commission on Higher Education in stating the case against discrimination:

> Discrimination in the admission of college students because of an individual's race, creed, color, sex, national origin, or ancestry is an antidemocratic practice which creates serious inequalities in the opportunity for higher education. The Commission is opposed to discrimination and believes it should be abandoned.
>
> Discriminatory practices deprive the Nation of a great variety of talent, create and perpetuate serious inequalities, and generate dangerous tensions. The impact of these social attitudes and behavior patterns adversely affects our entire society—group relationships, the individuals who discriminate, and the individuals who are discriminated against. This spiritual damage is not measurable; indeed it has never been recognized with complete honesty. To the extent that intolerant attitudes against members of minority groups are given support by our educational institutions, the fabric of our democratic life is endangered. . . .
>
> This Commission urges educational institutions to act as pioneering agents of leadership against discrimination. Each institution should conscientiously plan and prosecute a well organized program to reduce and where possible promptly to eliminate discrimination, not only by correcting its policies and practices, but also

* Data originally from Dr. Victor Johnson, Council on Medical Education and Hospitals, Am. Med. Assn. Some revision required.



WHY NO NEGRO STUDENTS ?

by educating its students to seek the abolition of discriminatory practices in all their manifestations.[28]

The need for elimination of discrimination applies not only to preliminary education and the 26 medical schools of the South (Table 7) but to other sections as well. Examples in large cities like New York and Chicago and small ones like Montclair, N. J., are well documented.[31,32,33] America must see that the time has come to abandon the segregative system. She cannot hope to keep her prestige in world affairs while 15,000,000 of her own citizens are kept boxed-in and locked-out.

Hospital Problems

The enactment into law of the Hospital Survey and Construction Act (Public Law 725 — 79th Congress), signed by President Truman on August 13, 1946, was the culmination of a prolonged national inquiry into the necessity of federal aid for the provision of adequate hospital facilities throughout the country. The Act provides for $1,125,000,000 of federal, state, and local funds to be spent over a five year period. Yet this will meet less than one third of the nation's actual hospital needs. Of the total sum only one third, or $375,000,000, may come from federal funds, which are available at the rate of $75,000,000 a year for five years. States are entitled to allotments on the basis of per capita income, and the entire program is under the supervision of the Surgeon-General of the U.S. Publice Health Service.

The Act contains an anti-discrimination clause which reads:

Sec. 622, f. That the State plan shall provide for adequate hospital facilities for the people residing in a State, without discrimination on account of race, creed, or color, and shall provide for adequate hospital facilities for persons unable to pay therefor. Such regulation may require that before approval of any application for a hospital or addition to a hospital is recommended by a State agency, assurance shall be received by the State from the applicant that (1) such hospital or addition to a hospital will be made available to all persons residing in the territorial area of the applicant, without discrimination on account of race, creed or color, but an exception shall be made in cases where separate hospital facilities are provided for separate population groups, if the plan makes equitable provision on the basis of need for facilities and services of like quality for each such group; and (2) there will be made available in each such hospital or addition to a hospital a reasonable volume of hospital services to persons unable to pay therefor, but an exception shall be made if such a requirement is not feasible from a financial standpoint.

In order to provide regulations for carrying out its provisions, the Act established a Federal Hospital Council. On November 14, 1946, the Council approved the following regulation respecting discrimination, which was in turn approved by the Federal Security Administrator, February 4, 1947:

Subpart G. Non-Discrimination. Before a construction application is recommended by a State Agency for approval, the State Agency shall obtain assurance from the applicant that the facilities to be built with aid under the Act will be made available without discrimination on account of race, creed, or color to all persons residing in the area to be served by that hospital. However, in any area where separate hospital facilities are provided for separate population groups, the State Agency may waive the requirement of assurance from the construction applicant if (a) it finds that the plan otherwise makes equitable provision on the basis of need for facilities and services of like quality for each such population group in the area, and (b) such finding is subsequently approved by the Surgeon General. Facilities provided under the Federal Act will be considered as making equitable provision for separate population groups when the fa-

TABLE 2. STATE BOARD RECORDS OF DEFUNCT NEGRO MEDICAL SCHOOLS

		LEONARD			FLINT			LOUISVILLE NATIONAL			KNOXVILLE			WEST TENNESSEE		
No.	Year	Passed	Failed	% Failed	Passed	Failed	% Failed	Passed	Failed	% Failed	Passed	Failed	% Failed	Passed	Failed	% Failed
1	1903	19	11	36.7	2	5	71.4	-	-	-	-	-	-	-	-	-
2	1904	12	22	64.7	8	10	55.5	1	0	0.0	0	3	100.0	2	1	33.3
3	1905	21	25	54.3	2	10	83.3	1	0	0.0	1	6	85.7	0	2	100.0
4	1906	31	24	43.6	11	13	54.2	-	-	-	1	2	66.7	0	2	100.0
5	1907	32	17	34.7	11	11	50.0	0	2	100.0	1	4	80.0	0	3	100.0
6	1908	44	23	34.3	11	9	45.0	2	4	66.7	2	4	66.7	4	4	50.0
7	1909	31	16	34.0	4	5	55.6	2	0	0.0	8	8	50.0	7	5	41.7
8	1910	23	25	52.1	4	2	33.3	1	5	83.3	1	4	80.0	4	5	55.6
9	1911	23	28	54.9	2	4	66.7	4	7	63.6				1	13	92.8
10	1912	24	30	55.6										8	10	55.6
11	1913	25	28	51.9										6	10	62.5
12	1914	10	18	64.3										8	36	81.8
13	1915	8	4	33.3										25	17	40.5
14	1916													10	18	64.3
15	1917													9	10	52.6
16	1918													8	10	55.6
17	1919													3	4	57.1
18	1920													0	3	100.0
19	1921													0	4	100.0
20	1922													2	6	75.0
21	1923													1	5	83.3
TOTAL		303	271	47.2	55	69	55.6	11	18	62.1	14	31	69.0	98	168	63.2
No. EXAMINED		574			124			29			45			266		

cilities to be built for the group less well provided for heretofore are equal to the proportion of such group in the total population of the area, except that the State plan shall not program facilities for a separate population group for construction beyond the level of adequacy for such group.

Obviously there are many loopholes in such specifications. Consequently, the recommendations of the Commission on Hospital Care, a private body of distinguished national membership appointed through the American Hospital Association, carried considerable interest. In its comprehensive report "to the American people as a guide to the future development of hospital care," the Commission devotes a chapter to Negro problems.[29] It frankly acknowledges that there is not now available to Negroes "the same quantity or quality of hospital care as there is for the white population," and states that "this is due, in part, to inadequate facilities, to the inferior quality of those which are available, and to the inadequate number and quality of Negro physicians and nurses."

The inferior quality of hospital care in segregated set-ups, particularly in separate hospitals for Negroes is cited. Concerning personnel the report states:

> The number of Negro physicians is small compared with the total Negro population. Many of them were poorly prepared for the practice of medicine and many others have been denied the privilege of hospital service on racial grounds in the early years of their professional careers. The Negro physician finds it difficult to develop and maintain his proficiency because of lack of access to hospital service.

The recommendations of the report are quoted in full as being particularly significant:

> Adequate and competent hospital care should be available without restriction to all people regardless of race, creed, color or economic status.
>
> Facilities for the care of Negroes should be provided in hospitals that serve white patients rather than in separate hospitals. In those communities in which segregation is required by law, as good hospital service should be maintained for Negro patients as is provided for white patients.
>
> Qualified Negro physicians should be admitted to membership on the medical staffs of hospitals on the same basis as are other physicians.
>
> Efforts should be made to increase the number of Negro nurses, and the practice of employing them in hospitals should be extended.
>
> Hospitals should provide the same opportunity for the continuing professional education of Negro physicians as is provided for other physicians.

These auspicious recommendations may give rise to unfounded optimism, but the indications are that, both north and south, powerful efforts are going to be exerted to make new hospital construction conform to entrenched patterns. The proposed new hospitals in Detroit, Cleveland, Atlanta, Greensboro, and Los Angeles are presumptive examples. There are certain common elements in the hospitals proposed for these localities. First, it is recognized that what will emerge, whether openly or feigned, is a new Negro hospital. Second, the factor of need is urged as antecedent to all other considerations. Third, there is support of the projects by both Negroes and whites, overtly because of need, and covertly, because a means will be afforded whites to resist integration and at the same time contain the Negro problem, while opportunities for exploitation of segregation by a limited number of Negroes will be provided. Fourth, in each of these cities new hospital construction which does not anticipate Negro clientele is contemplated. The existence of a new Negro hospital, by whatever name called, would certainly have the effect of nullifying or reducing whatever representations might be made, on the basis of need, for complete eligibility of all citizens for all facilities, whether as patient or professional.

Policy in respect to veterans' hospitals has shown the same line of resistance to abandonment of segregative practice. Although legal provisions prescribe that medical care for veterans shall be without discrimination, of the 127 veterans' hospitals operating as of November 3, 1947, twenty-four have

TABLE 3. NUMBER OF MEDICAL GRADUATES OF HOWARD AND MEHARRY, BY YEAR AND SEX

	Howard					Meharry				
Year	Men	Women	Total	Grand Total	Class	Men	Women	Total	Grand Total	Class
1871	5	0	5	5	1					
1872	7	1	8	13	2					
1873	5	0	5	18	3					
1874	5	1	6	24	4					
1875	3	0	3	27	5					
1876	7	0	7	34	6					
1877	8	2	10	44	7	1	0	1	1	1
1878	7	1	8	52	8	3	0	3	4	2
1879	10	0	10	62	9	8	0	8	12	3
1880	14	1	15	77	10	8	0	8	20	4
1881	9	0	9	86	11	3	0	3	23	5
1882	14	1	15	101	12	7	0	7	30	6
1883	15	0	15	116	13	5	0	5	35	7
1884	18	3	21	137	14	8	0	8	43	8
1885	27	0	27	164	15	7	0	7	50	9
1886	19	1	20	184	16	10	0	10	60	10
1887	20	1	21	205	17	10	0	10	70	11
1888	22	0	22	227	18	18	0	18	88	12
1889	23	3	26	253	19	14	0	14	102	13
1890	25	1	26	279	20	14	0	14	116	14
1891	34	0	34	313	21	13	0	13	129	15
1892	28	0	28	341	22	24	0	24	153	16
1893	22	2	24	365	23	35	1	36	189	17
1894	40	1	41	406	24	39	1	40	229	18
1895	21	0	21	427	25	29	0	29	258	19
1896	10	1	11	438	26	11	0	11	269	20
1897	17	5	22	460	27	34	0	34	303	21
1898	30	3	33	493	28	29	2	31	334	22
1899	19	1	20	513	29	36	2	38	372	23
1900	18	1	19	532	30	33	1	34	406	24
1901	15	2	17	549	31	36	1	37	443	25
1902	26	4	30	579	32	55	1	56	199	26
1903	24	4	28	607	33	40	1	41	540	27
1904	31	4	35	642	34	55	3	58	598	28
1905	31	1	31	673	35	57	3	60	658	29
1906	27	1	28	701	36	64	4	68	726	30
1907	39	4	43	744	37	70	3	73	799	31
1908	21	2	23	767	38	71	3	74	873	32
1909	32	0	32	799	39	60	3	63	936	33
1910	30	0	30	829	40	53	3	56	992	34
1911	28	1	29	858	41	56	0	56	1048	35
1912	38	1	39	897	42	70	1	71	1119	36
1913	20	1	21	918	43	90	0	90	1209	37
1914	31	1	32	950	44	74	1	75	1284	38
1915	20	0	20	970	45	84	1	85	1369	39
1916	15	0	15	985	46	81	3	84	1453	40

Howard data from official records. Meharry data through courtesy of Dr. Michael J. Bent, dean.

separate wards for colored patients, and nineteen of the hospitals, all located in the South, do not admit Negroes at all except in cases of medical emergency.[8]

As a means of containing the Negro problem, a separate veterans hospital was built at Tuskegee, Alabama, after World War I. To relieve the pressure of the increased load of World War II veterans a second separate hospital was authorized March 15, 1947, at Mound Bayou, Mississippi. On February 2-3, 1948, Senate hearings were held on S. 1414, a bill to provide for the establishment of a veterans hospital for Negro veterans at the birthplace of Booker T. Washington in Franklin county, Virginia.

Those in opposition to this measure pointed out (1) that the proposal is contrary to the declared policy of the Veterans Administration; (2) that the Tuskegee institution is known to have

TABLE 3

	Howard					Meharry				
Year	Men	Women	Total	Grand Total	Class	Men	Women	Total	Grand Total	Class
1917	13	0	13	998	47	96	1	97	1550	41
1918	28	0	28	1026	48	76	1	77	1627	42
1919	21	1	22	1048	49	41	0	41	1668	43
1920	27	1	28	1076	50	39	0	39	1707	44
1921	28	0	28	1104	51	42	0	42	1749	45
1922	22	0	22	1126	52	31	1	32	1781	46
1923	24	2	26	1152	53	63	1	64	1845	47
1924	21	2	23	1175	54	37	1	38	1883	48
1925	73	1	74	1249	55	34	0	34	1917	49
1926	57	1	58	1307	56	46	0	46	1963	50
1927	48	2	50	1357	57	55	0	55	2018	51
1928	51	0	51	1408	58	46	1	47	2065	52
1929	42	2	44	1452	59	47	0	47	2112	53
1930	61	3	64	1516	60	38	0	38	2150	54
1931	52	2	54	1570	61	44	1	45	2195	55
1932	51	4	55	1625	62	50	0	50	2245	56
1933	42	0	42	1667	63	34	2	36	2281	57
1934	64	1	65	1732	64	39	2	41	2322	58
1935	52	2	54	1786	65	40	0	40	2362	59
1936	33	3	36	1822	66	32	0	32	2394	60
1937	33	1	34	1856	67	34	1	35	2429	61
1938	24	0	24	1880	68	33	2	35	2464	62
1939	27	2	29	1909	69	28	2	30	2494	63
1940	33	2	35	1944	70	39	0	39	2533	64
1941	17	4	21	1965	71	46	2	48	2581	65
1942	29	4	33	1998	72	48	2	50	2631	66
1943	24	3	27	2025	73	49	1	50	2681	67
1944	67	2	69	2094	74	(Mar. 60	2	62	2743	68
						(Dec. 54	5	59	2802	69
1945	53	3	56	2150	75	60	4	64	2866	70
1946	62	3	65	2215	76	59	1	60	2926	71
1947	57	5	62	2277	77	55	2	57	2983	72
TOTAL	2165	112	2277	2277	77	2910	73	2983	2983	72

shared in the general professional deterioration in veterans hospitals as a whole, which led to the recent national exposé and reforms, plus the special disadvantages and isolation attendant upon segregation; (3) that the isolated locations of all three Negro hospitals, built, authorized or proposed, were directly the opposite of the locations near large medical centers preferred in the widely publicized reforms of the V.A.; (4) that separate hospitals would be unnecessary if existing or planned hospitals were opened to all veterans; and (5) that the difficulties raised against an integration policy have been shown to be largely mythical.[3]

Here again has been encountered the same mixed support for the proposal by whites and by Negroes who think it the best thing for the present.

Summary

The urgency for an immediate remedy of conditions is accentuated by recognition of the fact that were every racial bar preventing access to health facilities, both for training and treatment, dropped tomorrow, and the dual educational system abolished, that it would require at least ten years to achieve parity for the minority group in those areas where he is below the national norm.

With time running short in the face of world developments, and recommendation for abandonment of segregation and discrimination coming from every conceivable qualified authority, we close with the words of the Great Emancipator, "With malice toward none, with charity for all, with firmness in the right as God gives us to see the right, let us strive on to finish the task we are in."

1. For recent events have shown an unprecedented awakening of public and official consciousness to the injustices and inadequacies in human and material provisions for the health needs of American citizens who carry genes of presumed African origin.

2. A historical review demonstrates as clearly as any current survey the obstacles which have confronted the Negro professional health worker at every step of the way in getting training and getting established, despite the constant and enormous need for his services.

3. The conclusion from this and previous studies that justice and equality of opportunity in health matters as in other things cannot be achieved under a segregated system has been sustained in the past months by the findings of national bodies of commanding prestige, such as the President's Committee on Civil Rights, the President's Commission on Higher Education and the Commission on Hospital Care. And the President of the United States has called for prompt and sweeping correction of conditions in his Civil Rights program.

4. Present indications are that adherents to the *status quo* will make every attempt to block or to circumvent real changes in the entrenched system of segregation both in respect to medical, educational, and hospital facilities.

5. And the tragic implications of regional educational proposals as well as the importance of federal policies and action for the future have been pointed out.

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Fig. 1. ANNUAL NUMBERS OF GRADUATES OF HOWARD AND MEHARRY MEDICAL SCHOOLS

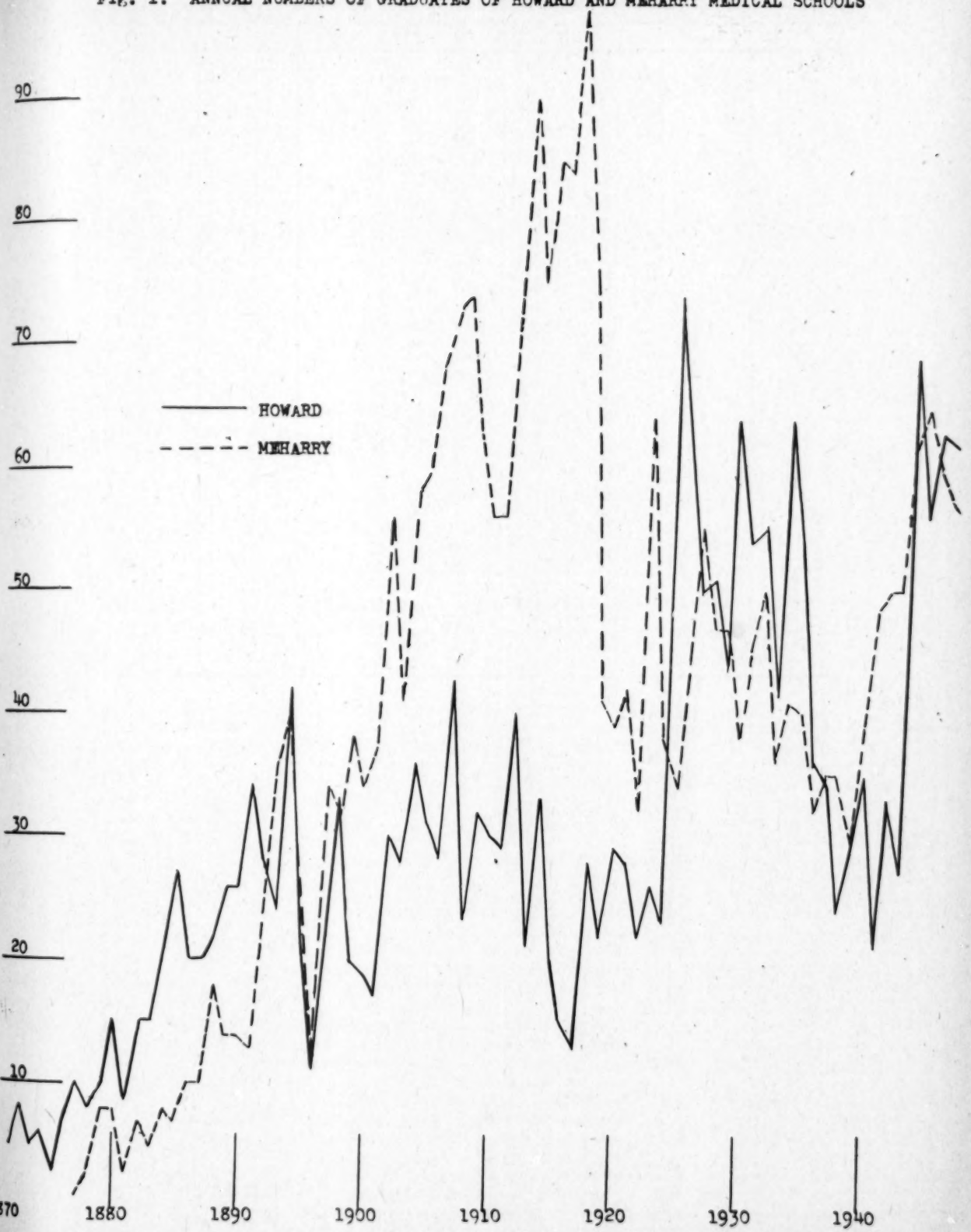

Table 4. TOTAL NUMBER OF GRADUATES OF HOWARD AND MEHARRY, BY YEAR, 1877-1947

Class No.	Year	Total	Grand Total	Class No.	Year	Total	Grand Total
1.	1871	5	5	40.	1910	86	1821
2.	1872	8	13	41.	1911	85	1906
3.	1873	5	18	42.	1912	110	2016
4.	1874	6	24	43.	1913	111	2127
5.	1875	3	27	44.	1914	107	2234
6.	1876	7	34	45.	1915	105	2339
7.	1877	11	45	46.	1916	99	2438
8.	1878	11	56	47.	1917	110	2548
9.	1879	18	74	48.	1918	105	2653
10.	1880	23	97	49.	1919	63	2716
11.	1881	12	109	50.	1920	67	2783
12.	1882	22	131	51.	1921	70	2853
13.	1883	20	151	52.	1922	54	2907
14.	1884	29	180	53.	1923	90	2997
15.	1885	34	214	54.	1924	61	3058
16.	1886	30	244	55.	1925	108	3166
17.	1887	31	275	56.	1926	104	3270
18.	1888	40	315	57.	1927	105	3375
19.	1889	40	355	58.	1928	98	3473
20.	1890	40	395	59.	1929	91	3564
21.	1891	47	442	60.	1930	102	3666
22.	1892	52	494	61.	1931	99	3765
23.	1893	60	554	62.	1932	105	3870
24.	1894	81	635	63.	1933	78	3948
25.	1895	50	680	64.	1934	106	4054
26.	1896	22	707	65.	1935	94	4198
27.	1897	56	763	66.	1936	68	4216
28.	1898	64	827	67.	1937	69	4285
29.	1899	58	885	68.	1938	59	4344
30.	1900	53	938	69.	1939	59	4403
31.	1901	54	992	70.	1940	74	4477
32.	1902	86	1078	71.	1941	69	4546
33.	1903	69	1147	72.	1942	83	4629
34.	1904	93	1240	73.	1943	77	4706
35.	1905	91	1331	74.	1944	190	4896
36.	1906	96	1427	75.	1945	120	5016
37.	1907	116	1543	76.	1946	125	5141
38.	1908	97	1640	77.	1947	119	5260
39.	1909	95	1735				

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Table 5.—Excess of State Board Examinees Over Graduates, Howard and Meharry, 1903-46.

	Howard	*Meharry*	*Both*
Graduates examined, 1903-46	2137	3834	5971
Physicians graduated, 1903-46	1698	2484	4182
Excess of examinees over graduates	439	1350	1789
Excess as percentage of graduates	25.8	54.3	42.7

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Table 7.—Approved Medical Schools

A. *Schools Which Do Not Admit Negro Students*

1. Medical College of Alabama
2. University of Arkansas
3. Georgetown University

(*Continued on page* 125)

Along the N.A.A.C.P. Battlefront

FUND APPEAL

The Ingram Case: An urgent appeal for funds for the legal defense of Mrs. Rosa Lee Ingram, widowed mother of twelve children, and her two young sons, now under sentence of death in Americus, Georgia, went out in March to our 1600 branches.

The death sentences imposed on Mrs. Ingram, an impoverished sharecropper, and her sons originated in an argument last November with a neighboring white farmer, John Ed Stradford. Mrs. Ingram's pigs had rooted under the fence dividing Stratford's land from the farm on which she worked. Armed with a rifle, Stratford set out to shoot the animals. He encountered Mrs. Ingram and struck her with the butt of the firearm, inflicting a deep and bloody wound. She was struggling with him to prevent him from shooting her when two of her sons, Sammie Lee, 14, and Wallace, 17, rushed to her aid. Sammie Lee used the hammer with which he was repairing the fence to strike the white assailant and save his mother's life. The blow was fatal.

Mrs. Ingram and her sons were arrested and held without bail or trial for three months. In a one-day trial on February 3, with only court-appointed counsel to defend them, the mother and two sons were convicted and sentenced to death.

NAACP lawyers sought a new trial for the Ingrams. A stay of execution, originally set for February 27, was granted and the attorneys then filed a motion for a new trial, scheduled for a hearing on March 20 at Americus, Georgia. The NAACP has not only undertaken the legal defense of Mrs. Ingram and her sons, but has also assumed responsibility of taking care of the motherless children ranging in age from 17 months to 14 years.

Unhappily our funds have been depleted by the heavy costs of the fights we have made in recent years against restrictive covenants, disfranchisement, educational inequality, job discrimination and gross court injustice. We can fight for the Ingrams and others like them only if you will help us. Checks or money orders should be made payable to Allan K. Chalmers, Treasurer, NAACP, and mailed to the NAACP at 20 West 40th Street, New York 18, N. Y.

New Trial Sought: In a last minute effort to save the life of 20-year-old Samuel Taylor, convicted of rape by an Alabama court, NAACP attorneys on March 3, filed a petition with the U. S. Supreme Court, seeking a review of the judgment of the Alabama supreme court, which has confirmed the death sentence imposed by the circuit court of Mobile county.

Charging that the youth's conviction was obtained through the use of a confession extorted by force, violence and fear, in violation of the Fourteenth Amendment, the petition seeks a new trial free from fear. Pending the review of his case, Taylor has been granted a reprieve by Governor James E. Folsom until April 23.

Arrested with three other Negro youths in the small town of Prichard, Alabama, nearly two years ago, Taylor was charged with the rape of a 14-year-old white school girl. Removed to the city jail, he was grilled, brutally beaten and otherwise mistreated by several police officers for a period of four consecutive nights, the petition alleges. His companions, charged with robbery, were similarly brutalized.

In fear of his life, Taylor confessed to the crime which the police accused him of having committed. Because of this fear, he failed to call to the attention of the attorney appointed to defend him the violent means by which the confession was extorted. He was convicted by the Alabama court on November 19, 1946.

Following his conviction and a futile appeal to the Alabama supreme court, his attorney filed the petition for a review of the judgment on the grounds that he had obtained new evidence that the confession used to convict Taylor had been extorted by torture. Supporting the petition were affidavits signed by the three youths arrested with Taylor who witnesed the police assault. The supreme court of Alabama rejected this application for a writ of error *coram nobis* (before us). The NAACP petition to the U. S. Supreme Court cites this refusal of the Alabama court as further grounds for granting a review of the case.

Seek Equal Salaries: The southwide fight for equalization of teachers' salaries was extended to Jackson, Mississippi, with the filing of a suit against the Jackson school officials by Mrs.

SUBSEQUENT TO THE U. S. SUPREME COURT *decision in the Ada Sipuel case, these six students applied for graduate work in four departments of the University of Oklahoma in January in a move to break racial segregation in higher education. Reading from left to right, back row, they are George McLaurin, Mozeal A. Dillon, Helen Holmes; front row, Mauderie H. Wilson, James Bond, and Ivor Tatum.*

Gladys Noel Bates, science teacher in the local Smith Roberts school.

Attorneys for Mrs. Bates have filed a complaint in the U. S. district court charging that over a long period of years Negro school teachers and principals in the Jackson separate school district have been paid less salary "than white teachers and principals of equivalent qualifications and experience." The complaint further charges that the annual increases given to Negro teachers and principals is less than that given to white teachers and principals. This discrimination, the lawyers maintained, is in violation of the Fourteenth Amendment.

The suit brought by Mrs. Bates was filed on March 4 in behalf of herself and of all Negro teachers and principals in Jackson. It followed failure to obtain equal salaries through petition to the local board of trustees. The board, rejecting the petition, declared it was impossible to grant the pay raises at this time.

State superintendent of education J. M. Tubb expressed the opinion that equalization of salaries was a matter for legislative action. However, the Mississippi house of representatives within a week after filing of the suit sidetracked a teachers' pay scale bill because some legislators protested that passage of the bill would result in equalization of salaries for Negro and white teachers.

The Mississippi suit is the 36th filed by the NAACP since the original case in Maryland in 1936. In addition to Maryland and Mississippi, suits for equalization of teachers' salaries have been filed in Virginia, Florida, Oklahoma, Kentucky, Tennessee, Louisiana, Georgia, Alabama, Arkansas, Illinois, Texas and South Carolina.

LIFE MEMBER

Rabbi Cahn: Newest life member of the NAACP is Rabbi Judah Cahn of Temple Israel in Lawrence, New York. Rabbi Cahn's membership is the gift of the board of trustees of the temple. Formal presentation of the $500 check for the membership was made by Herbert A. Goodkind, president of the temple, to Walter White following a recent address of the NAACP secretary at a temple meeting.

What the Branches Are Doing

COLORADO: The COLORADO SPRINGS branch has about forty cases against nine local restaurants which are to come up for court hearings within the next few weeks. On February 15 representatives from NAACP branches in the state met in Colorado Springs and formed a state organization, with election of the following officers: Charles Banks, president; Rev. T. J. Townsend, vice-president; Mrs. Ruth Cash Pointer, secretary; Mrs. M. L. Alexander, treasurer; Charles H. Iddings, publicity chairman; and an executive board to consist of two members from each branch. The conference adopted the following six-point program: (1) Formation of additional branches in the cities of the state; (2) memberships-at-large for those who do not have access to a local branch; (3) aid to cities which cannot handle their problems locally; (4) study of conditions and problems in the state with an eye to bettering them; (5) active support of progressive legislative measures; and (6) to serve as a clearing house for information as well as a coordinating agency between the branches.

ELMER HENDERSON, *executive secretary of the National Council for a Permanent FEPC, addressing the fellowship banquet, February 21, of the Midwest Regional NAACP Conference, held at Indianapolis, Indiana, February 21-22. Seated at Mr. Henderson's left is Gloster B. Current, director of branches.*

INDIANA: Regular meetings of the KOKOMO branch are being held the first and third Mondays of each month, with the first devoted to business and the second confined to round table discussions.

Branch delegates to the Midwest Regional Conference were Hollis King, Mrs. Louise King, Lorna Artis, Robert Long, and Mrs. Elizabeth Orndorff. Branch membership campaign will begin April 12 and last through June 15, with the goal set at 500 members.

NEW JERSEY: Ella J. Baker, former director of NAACP branches, was guest speaker February 18 to a mixed audience of some 300 people at a meeting held by the LONG BRANCH unit in celebration of the thirty-ninth anniversary of the NAACP. Emphasis in Miss Baker's talk was upon the gains made by the Association in its thirty-nine years of existence.

Harold A. Lett, of the New Jersey state department of education, division against discrimination, was guest speaker at the Brotherhood Week program sponsored by the ORANGE branch February 22. Other speakers were Spencer Miller, Jr., chairman of the New Jersey Conference of Christians and Jews; Dr. John E. Usher, prominent churchman; Rev. A. J. Tibbs, pastor of the Calvary Baptist church; and Rabbi Julius A. Feingold, of the Temple Sharey Tefilo, East Orange.

Samuel A. Williams, branch president, sent a letter to Assemblyman William T. Andrews on abolition of segregation in national guards, reading as follows:

"Members of the NAACP branch of the Oranges are anxiously watching the developments in New York in regards to the abolition of segregation in the National Guard.

"We, in New Jersey, are proud of the fact that our state has taken the lead in this matter but it will be of no avail unless the Great State of New York will do likewise; thereby aiding in stamping out one of the greatest evils of discrimination in our country.

"We urge you to use your untiring efforts to see that this worthy bill will be enacted into law."

NEW YORK: Mrs. Jesse W. Routte, chairman of the legal redress committee of the JAMAICA, Long Island, branch, has the distinction of being the first Negro woman to serve on a Queens county grand jury. Mrs. Routte is active in the civic, business, and educational life of Queens county.

OHIO: In a special meeting, Thursday, February 12, 1948, the legal committee of the CLEVELAND branch laid plans to file suit against the Cleveland board of education on behalf of Elmer M. Thompson, applicant for the electrical trade at the Cleveland Trade School. Nathan K. Christopher, branch president, Dr. James E. Levy, chairman of the NAACP education committee, and Attorney Ermer L. Watson, chairman of the legal committee, all requested court action after hearing a summary of all the steps that had been taken. Charles P. Lucas, NAACP executive secretary and Shelton B. Grainger, industrial secretary of the Urban League, carefully recited to the NAACP lawyers the administrative remedies that had been complied with. The lawyers discussed the possible court action and voted unanimously to empower the subcommittee composed of attorneys George V. Johnson, Charles D. Quick and William B. Saunders to proceed with the drafting of the necessary legal papers at once.

The discriminatory practices of the Cleveland Trade School have attracted nation-wide attention and from many sections of the country inquiries are coming in concerning the progress of the case. The Cleveland school board has allowed an outside group to determine who shall be admitted to Cleveland's tax-supported school. An effort has been made to shift the responsibility from the local board of education to the state department of vocational training. The Cleveland branch feels that the only method of rectifying the situation in Cleveland rests with a decision in the courts.

For several months, Governor Herbert of Ohio has delayed a showdown on the plan to activate segregated National Guard units in Ohio, although the Cleveland branch has repeatedly requested a conference on behalf of a group of organizations in Cleve-

land interested in the situation. The conference was to have been arranged with the adjutant general of Ohio, with the governor participating, but it was never held.

The legal committee of the NAACP agrees that a proposal to seek a ruling from the attorney general of the state of Ohio is unnecessary and that the requested move was a matter of policy and not law, since the chief executive of the state of Ohio could take the same position as that of the governors of New Jersey and Connecticut, if he desired.

TENNESSEE: The NASHVILLE branch sponsored a forum debate February 29 on the subject "Shall Meharry Accept the Proposal of the Southern Governors Conference to Make the Medical School one of its Regional Institutions?" Speakers for the affirmative were Dr. M. Don Clawson, branch president, and Graham Hall, chairman of the Meharry trustee board; on the negative were Z. Alexander Looby, noted Nashville lawyer, and L. W Williams, editor of the Nashville *Globe and Independent*. Rev. George W. Harvey was moderator.

HONORED — *Toastmaster Arthur Spingarn and Dr. W. E. B. Du Bois pictured at the latter's 80th birthday dinner in the Hotel Roosevelt, New York City, February 23. The dinner was sponsored by the Fisk Club of New York, of which Miss Betty Grayson is president.*

PRESIDENT TRUMAN *views Virgin Islands scenery with Governor William Hastie as the two ride over Brack mountain, overlooking Magens bay.*

Acme

What the Regions Are Doing

WEST COAST REGION: *San Francisco*: Thurgood Marshall, special counsel, NAACP, was principal speaker at the mass meeting Sunday afternoon, March 7, at the Second Baptist church, 24th and Griffith, Los Angeles.

This mass meeting was the highlight of the West Coast Regional Conference, with delegates from Arizona, California, Idaho, Neveda, Oregon, Utah, Washington and the Territory of Hawaii. There were over 200 delegates in attendance.

Gloster B. Current, director of branches, was also a speaker on the Sunday afternoon program.

STOCKTON: The Stockton, California, branch held a banquet in celebration of the 39th Anniversary of the organization of the National Association for the Advancement of Colored People on Thursday, February 12, at Clay Street Methodist church.

Mr. Kenneth White, chairman of the entertainment committee, along with John Isaac Dockery, president of the branch, took the lead in preparation for this mammoth banquet where almost 300 people were in attendance.

West coast regional secretary N. W. Griffin was guest speaker at the anniversary celebration program which preceded the banquet. Mr. Griffin laid stress on "The Report of the President's Committee on Civil Rights," and urged the branch to base its 1948 program upon the recommendations made therein, calling attention to the fact that the West Coast regional office had distributed more than 500 copies of this report to branches in Region I.

SOUTHWEST REGION: Idabel Leads Off: As is fitting, the home town of Oklahoma state president, Dr. H. W. Williamston, which is the little city of Idabel situated in the southeast corner of the state, led off March 7 with a great public meeting to open Oklahoma's campaign for $25,000 to finance its court fights on jim crow in education.

LUBBOCK AND ABILENE: In February the regional secretary conducted a district training conference for one day in Lubbock and the next in Abilene. About fifty folk gathered from all parts of West Texas (and also Revs. Horton and Hudson from Hobbs, New Mexico) and we worked and planned together and generally set the stage for great NAACP work in that area.

Incidentally, the regional secretary had an interesting conversation on his plane trip from Abilene to Dallas. His seatmate was a young white man, a medical student at Southwestern Medical College in Dallas. During the very pleasant conversation (strangely enough, on planes people seem to pay very little attention to race) he asked what the regional secretary's business was, and, when told, he asked this further question as the discussion turned to the Sweatt Case: "Would Negroes be satisfied if the state gave them separate educational facilities exactly equal to that given whites?"

The regional secretary's answer was this: "We Negroes are tax payers just like everybody else. We would not want to bear the tax burden of another two or three hundred million dollars to build another University of Texas when we already have a University of Texas that our money helped to build. That university is ours just like it is yours, because both our money went into it. The hitch is, you are let in and we are kept out. We have now decided that we want to go to our university, and that we don't want to spend our money building another useless university when we have one already.

"Furthermore, we feel we could not get the same education in a separate university even if it was exactly like the one we have and had an exactly equal faculty. Because the very fact that we had to go to this separate school would brand our minds with inferiority. And *you* in your 'white' school would be denied a real education, too. Because you would be educated into the lie of believing yourself superior. Real education is based on truth, not lies."

The young medical student agreed that all this made pretty good sense and frankly admitted that he had a suspicion somebody had been leading him up the wrong street.

Negro in Medicine

(*Continued from page* 122)

4. George Washington University
5. Emory University
6. University of Georgia
7. University of Louisville
8. Louisiana State University

9. Tulane University of Louisiana
10. Johns Hopkins University
11. University of Maryland
12. Duke University
13. Bowman Gray School of Medicine of Wake Forest College
14. University of Oklahoma
15. Medical College of the State of South Carolina
16. University of Tennessee
17. Vanderbilt University
18. Southwestern Medical College of the Southwestern Medical Foundation
19. University of Texas
20. Baylor University
21. University of Virginia
22. Medical College of Virginia
23. University of Mississippi
24. University of Missouri
25. University of North Carolina
26. West Virginia University

B. *Schools Which Admit or Do Not Exclude Negro Students*

1. University of California
2. College of Medical Evangelists
3. University of Southern California
4. Stanford University
5. University of Colorado
6. Yale University
7. Howard University
8. Loyola University
9. Northwestern University
10. University of Chicago
11. University of Illinois
12. Indiana University
13. State University of Iowa
14. University of Kansas
15. Boston University
16. Harvard University
17. Tufts College Medical School
18. University of Michigan
19. Wayne University
20. University of Minnesota
21. St. Louis University
22. Washington University
23. Creighton University
24. University of Nebraska
25. Albany Medical College
26. Long Island College of Medicine
27. University of Buffalo
28. Columbia University
29. Cornell University
30. New York Medical College
31. New York University
32. University of Rochester
33. Syracuse University
34. University of Cincinnati
35. Western Reserve University
36. Ohio State University
37. University of Oregon
38. Hahnemann Medical College and Hospital of Philadelphia
39. Jefferson Medical College of Philadelphia
40. Temple University
41. University of Pennsylvania
42. Woman's Medical College
43. University of Pittsburgh
44. Meharry Medical College
45. University of Utah
46. University of Vermont
47. University of Wisconsin
48. Marquette University
49. University of Washington
50. Dartmouth Medical School
51. University of North Dakota
52. University of South Dakota

For or Against Wallace?

(*Continued from page 106*)

first, although the article states it is not an endorsement of any candidate yet it gives a left handed endorsement of President Truman, referring to him as a friend of the Negro people. President Truman is not a friend of the Negro people. It's not words but deeds that count. He has sabotaged the F.E.P.C. and the anti-poll tax and the anti-lynching bills. We have more lynching in the South since he took office, and nothing has been done to punish the Georgia lynching and others.

He only speaks out now because he sees the support given to Wallace by the Negro people and wants it for himself. As to the report of the committee. This is also part of the political campaign and will only remain on paper because Truman has not a chance to be elected and if he would be he would find some way to betray his promises.

Besides the civil rights committee report is a fascist measure that would only result in strangling progressive organizations particularly the communist party the most and best fighters for the Negro people.

Mr. McDonald's political leaning is not hard to discern. His sweeping disregard of the facts and the use of certain catchwords label him as a partisan of the extreme left wing. The fact is that Mr. Truman supported the war time FEPC from its inception in 1941 while he was in the Senate, declared for a permanent FEPC long before he became President, asked Congress for a permanent FEPC in his first state of the nation message to that body after becoming president, endorsed it again last June in his Lincoln Memorial speech, and called for it in his last explosive message to Congress on February 2.

Sadly, Mrs. Willard Edmond Sullivan of Garden Grove, California, put the February issue into the incinerator:

I have always read my copy of "The Crisis" and passed it on to some friend to broaden its scope of influence, but the February number will have to go to the incinerator (in spite of the grand article about Roosevelt College, and the appealing pages on "The Indonesian Struggle for Independence." "The Operatic Stage" is something I would like to have a music critic friend read, too!)

It seems to me you weaken "The Crisis" and alienate friends when you promote any single candidacy politically.

We can only refer Mrs. Sullivan to the letter of Robert and Selma Singer of Chicago, quoted above.

We add to these written comments some remarks garnered on a brief trip in mid-February into the Middle West, with short stops in Indiana, Illinois, Iowa, and Missouri. The most prominent Negro Wallace supporter in Iowa said: "You did a clever job of knifing Wallace in that editorial." A Negro Des Moines business man said: "You were too good to Wallace in that issue. You know, we *know* him out here and he never did anything special for Negroes in this state."

A Negro Indiana Republican said: "It seemed fair to me. I never heard of him doing much until very recently. Of course, the more of our folks in his camp, the easier we Republicans win."

A Negro Republican in Truman's home city of Kansas City, Missouri, said: 'I've been a Republican all my life, but this man Truman has stuck his neck out further, with more to lose, than any man in the White House that I can remember. I'm thinking seriously of going along with him in November."

A cautious and thoughtful Negro Chicagoan with Democratic leanings said: "You stated the case for Wallace fairly. He isn't all good and he isn't all bad on our question. He will get a lot of Negro votes because right now he is saying the things they want to hear and those southern Democrats are yelling the things they don't want to hear."

Well, there you are. If you want to get into a first class argument, just say *anything*, good or bad, or indifferent about Henry A. Wallace.

—Roy Wilkins

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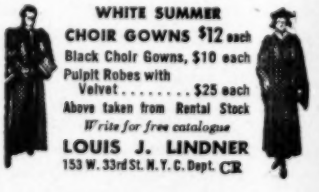
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The following directory of some of the many colored lawyers in this country is carried in response to numerous inquiries from readers desiring to contact attorney outside their home towns. The Crisis maintains no legal bureau, and the N.A.A.C.P. handles only cases involving color discrimination, segregation or denial of citizen rights.

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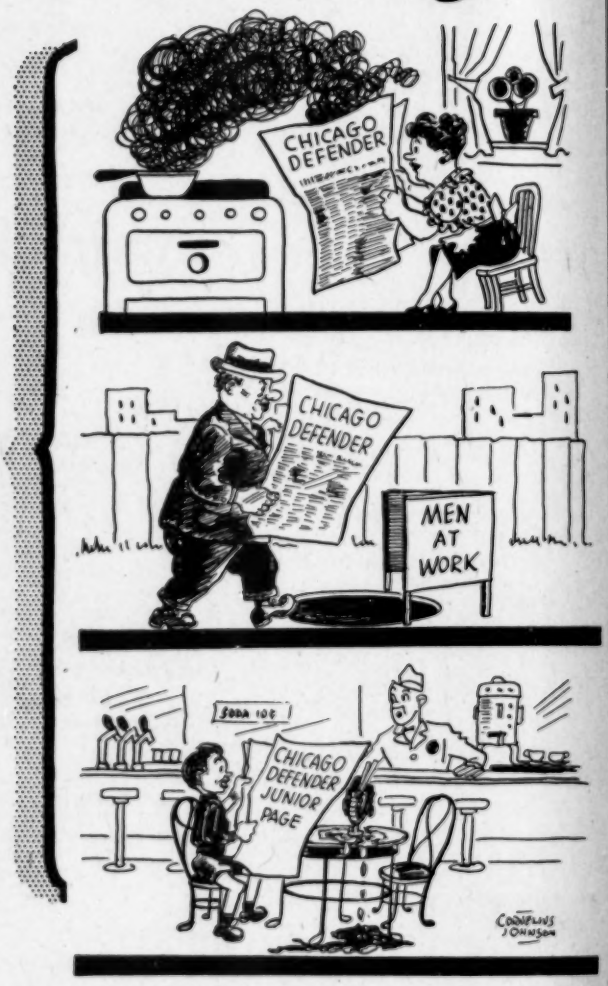

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